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PROCEEDINGS

1983

Annual Report

THE ROYAL COLLEGE OF DENTAL SURGEONS
OF ONTARIO

1983 Proceedings

ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO

230 St. George Street, Toronto, Ontario M5R 2N5

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REPORT OF THE R.C.D.S. PRESIDENT / 1983

Richard L.J. Filion, D.D.S.

At the end of 1983, I am pleased to report to the members of the R.C.D.S. and the hygienists whom we license that your College is presently in a good state and is fulfilling its mandate well.

Last year and the coming year are milestone years for the College because, among their activities, we are currently in the process of reviewing the Health Disciplines Act. The first stage of the process, that of submitting our views on various philosophical questions involved in self-government of health groups, has been completed and submitted. The next step involves detailed study of the briefs from other interest groups and finally the exercise will come down to discussions on specific issues with the government consultants. The College has a long list of items to address with government – some are items of law or procedure which have posed difficulties in the past, others are new developments which were unforeseen at the time of the enactment of the Health Disciplines Act in 1974. The College also has other matters to reintroduce and give a fresh thrust to such as the voting representation of Hygienists on Council and the use of credit cards to pay for dental services. The object of the College throughout the whole exercise is to do everything to assure the continuance of one of the best systems of dental delivery in country and the preservation of a self-governing body to regulate it.



In the meanwhile the Government, through its designated consultant, is carrying out an extensive search through similar legislation in other jurisdictions, both in Canada and in foreign countries. The purpose of this exercise, we have been told is to compare other modes of governing professions and to see if our system can be improved.

However, we have been assured by government that it is not planning any extensive changes in the way the major health professions are governed. We as a College and governing body look forward to a renewal of our mandate; that of protecting the public interest in the New Act.

One of the hallmarks of the present Council, and the way it wishes to be remembered, is that a genuine attempt has been made to have more dialogue with our members. We believe that this is occurring and I think that the members are reacting very positively to it. The input of members on all issues has been sought, either on an individual basis or through your professional association. In all cases this input has been positive, responsible and of great assistance to us who ultimately are

charged with making decisions.

I personally want this process to continue and I want our members to demonstrate conclusively to all, especially in this time of legislative review that dentistry can responsibly govern itself and that it is in the public interest that it should continue.

Over the past few years the College has aggressively pursued a policy of keeping abreast of new technology such as data processing, computers and modern office management methods. This policy coupled with the assumption of new duties such as examining hygienists and the provision of new services such as continuing education, has placed a problem of lack of physical space in our present premises. During the coming year a decision must be made regarding this issue so that we can continue to serve both our members and the public. To this end consultants are to be employed to determine our future needs both in physical space and staff.

"The object of the College is to do everything to assure the continuance of one of the best systems of dental delivery in the country."

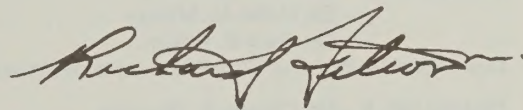
The Proceedings contains much information on the various activities of committees. I hope that you will familiarize yourselves with these reports and that you will not hesitate to convey your thoughts to your elected officials. I think that it is a very encouraging sign when I receive a letter from one of our members, even when its contents are in disagreement with what Council is doing, for this is in my opinion the mark of someone who really cares about this profession.

And speaking about people who really care about our profession may I take the opportunity to thank

that dedicated group of people who sit at our Council table. Over the past year they have given unselfishly of their time and energy to make the College a positive part of your professional lives. Their support for me has been total and much appreciated.

Our staff, from our Registrar to our secretaries continue to serve the College well and to make possible the execution of Council's policies. The guidance of Senior Staff is appreciated by all members of Council.

In closing, may I take this opportunity to thank the members for providing me with the honour of serving as your President. I hope that you will continue to support my Council and myself through the coming year by giving freely of your interest and input.



Richard L.J. Filion, D.D.S.
President

Elections

In accordance with the Health Disciplines Act and Ontario Regulation 447, an election of the Council of The Royal College of Dental Surgeons of Ontario was held from October to December, 1982.

In addition, as directed by Council, elections were held for two dental hygienists to serve as Official Observers on Council.

In early October 1982, nominations were called for by circular letter to each licensed dentist and dental hygienist resident in Ontario as of September 30th, 1982. Valid nominations were received from all districts.

The following candidates were declared elected by acclamation:

- District No. 2 – Dr. James I. Fawcett
- Dental hygienist observer from outside Metropolitan Toronto and York Region – Lynda Mickelson

The results of the elections held in Districts No. 1, No. 3, No. 4, No. 5, No. 6, No. 7, No. 8 and for the dental hygienist representative from Metropolitan Toronto and York Region are as follows:

District No. 1 – Dr. Willard Treleaven225
 – Dr. Ivan C. Wambera124

Dr. Willard Treleaven was declared elected

District No. 3 – Dr. Richard L.J. Fillion161
 – Dr. Robert R. Schiewe91

Dr. Richard Fillion was declared elected

District No. 4 – Dr. A. Bruce Hord391
 – Dr. Rollin M. Matsui823
 – Dr. Gary E. Pitkin845

Drs. Rollin Matsui and Gary Pitkin were declared elected

District No. 5 – Dr. Claude A. Doughty54
 – Dr. Warren R. Hilliard100

Dr. Warren Hilliard was declared elected

District No. 6 – Dr. Charles L. Consky130
 – Dr. Lorne V. Taylor223

Dr. Lorne Taylor was declared elected

District No. 7 – Dr. Kerry S. Mathers158
 – Dr. Harry C. Parrott119

Dr. Kerry Mathers was declared elected

District No. 8 – Dr. Randall T. Lang372
 – Dr. Richard T. Muirhead210

Dr. Randall Lang was declared elected

District of Metropolitan Toronto and York Region – Hygienists:

 – Laurie C. Lepik39
 – Jocelyn A. Pearce148

Mrs. Jocelyn A. Pearce was declared elected

The above election results were validated by the Returning Officers, Dr. M. Jackson and Dr. J. Kreutzer on December 8th, 1982.

The Faculty of Dentistry at the University of Toronto and the University of Western Ontario appointed Dr. Donald L. Anderson and Dr. J. Keith Hunter as Faculty Representatives on the R.C.D.S. Council. (Dr. Anderson resigned mid-May because of a sabbatical leave and Dr. G. Nikiforuk was appointed to replace him.)

According to notification received from the Ministry of Health, the following were appointed by government as members of the R.C.D.S. Council: Mr. James A. Monteith, Petrolia; Mrs. Eunice Swadron, Thornhill; Rev. Rondo Thomas, Toronto.

Committees 1983-1984

President: Dr. R.L.J. Fillion
Vice-President: Dr. J.I.H. Fawcett

STATUTORY COMMITTEES

Executive: R.L.J. Fillion, Chairman;
J.I.H. Fawcett, G.E. Pitkin, J.K. Hunter,
J.A. Monteith, *J.A. Pearce

Registration: L.V. Taylor, Chairman;
J.K. Hunter, E. Swadron, *J.A. Pearce

Discipline: J.I.H. Fawcett, Chairman;
K.S. Mathers, W.R. Hilliard, R.M. Matsui,
L.V. Taylor, G. Nikiforuk, E. Swadron,
R. Thomas, *L. Mickelson

Complaints: J.K. Hunter, Chairman;
W.H. Treleaven, J.A. Monteith,
*J.A. Pearce

STANDING COMMITTEES

Education: R.M. Matsui, Chairman;
W.R. Hilliard, R.T. Lang, L. Mickelson

Finance & Property: W.R. Hilliard, Chairman;
J.I.H. Fawcett, W.H. Treleaven,
L. Mickelson

Legal & Legislation: R.T. Lang, Chairman;
K.S.M. Mathers, W.R. Hilliard,
J.I.H. Fawcett, E. Swadron, J.A. Pearce

Professional Liability Insurance: L.V. Taylor, Chairman;
R.T. Lang, G. Nikiforuk, R.N. Jack,
L. Mickelson

Anaesthesia & Sedation: G.E. Pitkin, Chairman;
L.V. Taylor, R.M. Matsui, and a Representative from each dental faculty, the Ontario Society of Oral & Maxillofacial Surgeons, the Ontario Dental Society of Anaesthesiology and the Conscious Sedation Study Club

R.C.D.S./O.D.A. Liaison: R.L.J. Fillion, Chairman;
R.T. Lang, G.E. Pitkin, R. Thomas,
J.A. Pearce

R.C.D.S./O.D.H.A. Liaison: J.I.H. Fawcett, Chairman;
J.A. Monteith, G. Nikiforuk, L. Mickelson

AD HOC COMMITTEES

Manpower: G.E. Pitkin, Chairman;
J.K. Hunter, K.S.M. Mathers,
E. Swadron, J.A. Pearce

Quality Assurance: W.H. Treleaven, Chairman;
G. Nikiforuk, R.M. Matsui, K.S.M. Mathers,
J.I.H. Fawcett, R. Thomas

Supervision of Dental Hygienists: K.S.M. Mathers, Chairman;
J.K. Hunter, L.V. Taylor, G. Nikiforuk,
J.I.H. Fawcett, J.A. Monteith,
L. Mickelson, J.A. Pearce

Dental Implants: G.E. Pitkin, Chairman;
J. Cox, J. Druck, L. Pedlar, P. Watson

**May be invited to attend any meeting of the Committee (without voting privileges) where matters involving dental hygiene or a specific dental hygienist are to be considered.*

The Council

DISTRICT, UNIVERSITY AND LAY REPRESENTATIVES

DISTRICT REPRESENTATIVES



District 1

W.H. (Trev) Treleaven, D.D.S. represents the counties of Dundas, Frontenac, Glengarry, Grenville, Lanark, Leeds, Lennox, Addington, Prescott, Russell, Renfrew and Stormont and the Regional Municipality of Ottawa-Carlton.

He was born in Winnipeg, Manitoba, and attended elementary and high school there. Before joining the R.C.A.F., Trev taught public school in Manitoba and after three years service and further study he received his dental degree from the University of Toronto in 1951.

"Trev" practised as an associate in Winnipeg for one year before moving to Kingston where he has practised since 1952. He was President of the Kingston and District Dental Society in 1958 and 1968 and served on the O.D.A. Board of Governors for six years, four of which were on the Executive Council.

He has been active in many community organizations in Kingston including the Rotary Club, YM-YWCA, Kingston figure Skating Club, Kingston Ability Centre and is an elder of St. Margaret's United Church. Trev and his wife, Betty, have five children and when time permits they enjoy travel and curling.

His College activities include serving as Chairman of the Quality Assurance Committee and as a member of the Property and Finance and Complaints Committees.



District 2

James I.H. Fawcett, D.D.S. from Lindsay is the representative. His constituency includes the Regional Municipality of Durham and the counties of Hastings, Northumberland, Peterborough, Prince Edward, Victoria and Haliburton.

He was born in Toronto and, after attending Vaughan Road Collegiate, graduated from the University of Toronto, Faculty of Dentistry in 1959. Jim was a dental intern at Philadelphia General Hospital for one year and established a general practice in Lindsay after a 1-1/2 year stay in Toronto.

He served as President of the Peterborough and District Dental Society in 1966-67 and is active in local politics. Jim was a member of Lindsay Town Council from 1965-1970 and is presently Chairman of the Board of Parks Management. He is also a Trustee of Cambridge Street United Church.

He is currently Vice-president of the Council of the R.C.D.S. and serves as Chairman of the Discipline and R.C.D.S.-O.D.H.A. Liaison Committees. He also sits on the Executive, Finance and Property, Quality Assurance, Supervision of Hygienists and Legal and Legislation Committees.



District 3

Richard L.J. Filion, D.D.S. represents Northern Ontario. This includes the Districts of Algoma, Cochrane, Kenora, Manitoulin, Nipissing, Rainy River, Sudbury, Thunder Bay and Timiskiming. He was born in Sudbury and, after receiving his high school education in Sturgeon

Falls, attended the University of Toronto's Faculty of Dentistry, graduating in 1966. He has practised in Sudbury since that time.

This year, much of his time has been taken up with the Presidency of the College but when time permits, Richard pursues his interest in flying, fishing, photography and gardening.

As President of the College, he serves on most committees, has attended many dental society meetings across the province and has also represented the R.C.D.S. on the national level.



District 4 is made up of the Municipality of Metropolitan Toronto and the Regional Municipality of York. Because of its large population, this district has two representatives on Council. They are Rollin M. Matsui, D.D.S. and Gary E. Pitkin, D.D.S.

Rollin Matsui was born in Toronto and attended Jarvis Collegiate Institute. He obtained a B.Sc. degree from Victoria College at the University of Toronto in 1975 and a dental degree from the same University in 1979.

Rollin has practised in Toronto since graduation and has recently established his own dental practice. He is an associate in dentistry at the University of Toronto demonstrating in periodontics.

Among his other accomplishments during his first year on the R.C.D.S. Council, Rollin and his wife, Paula, became the proud parents of their first child. His College activities include the chairmanship of the Education Committee and membership on the Discipline, Anaesthesia and Sedation and Ad Hoc Quality Assurance Committees.



Gary Pitkin was born in Toronto and received his high school diploma from St. Michael's College School before attending the Faculty of Dentistry at the University of Toronto, graduating in 1966.

Since that time, he has practised in Agincourt and has actively participated in many areas of organized dentistry. Gary has served all levels of the East Toronto Dental Society including its presidency in 1973-74. He was an Ontario governor to the Canadian Dental Association and also served as President of the Ontario Dental Association in 1979-80.

Gary has an interest in sedation techniques and has served as the Chairman of the Anaesthesia and Sedation Committee, the Ad Hoc Committee on Manpower, the Ad Hoc Committee on Implants and is also a member of the Executive and R.C.D.S./O.D.A. Liaison Committees.

Gary's outside interests include the video industry, travel and the Blue Jays. He is married to Kass and has two children, Lana and David.



District 5

Warren R. Hilliard, D.D.S. represents the counties of Bruce, Dufferin, Grey, Huron and Simcoe and the Districts of Muskoka and Parry Sound.

He attended Orangeville and District Highschool and the University of Guelph before entering the Faculty of Dentistry at the University of Toronto. He obtained his D.D.S. in 1974 and has practised in the town of Orangeville since that time.

Warren and his wife, Dorothy who is a Registered Nurse, have

two sons and he is an active member of the Orangeville Lions Club. His hobbies include fishing, hunting and ultra-light flying.

His College responsibilities include the chairmanship of the Finance and Property Committee and membership on the Education, Discipline and Legal and Legislation Committees.



District 6

Lorne V. Taylor, D.D.S. represents Southwestern Ontario which consists of Elgin, Essex, Kent, Lambton and Middlesex counties including the cities of London and Windsor.

Lorne was born in Toronto and, after graduating in dentistry from the University of Toronto in 1944, served in the Canadian Army Dental Corps for two years. He practised general dentistry in London until 1966 when he limited his practice to endodontics. He is a Diplomate of the American Board of Endodontics and has taught at both Faculties of Dentistry in Ontario. He is past-president of the London and District Dental Society and a past-governor of the Ontario Dental Association.

He is Chairman of the Registration and Professional Liability Insurance Committees and also sits on the Anaesthesia and Sedation, Discipline and Ad Hoc Supervision of Dental Hygienists Committees.



District 7

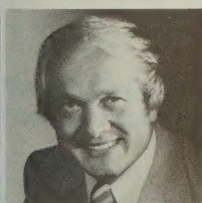
Kerry S. Mathers, D.D.S. represents the counties of Brant, Oxford, Perth, Wellington and the Regional Municipalities of Haldimand-Norfolk and Waterloo.

He was born in Toronto, Ontario attended Kitchener-Waterloo Collegiate and Vocational School and obtained his D.D.S. from the University of Toronto in 1961.

He served in the Royal Canadian Dental Corps from 1961 to 1964 and has been in private general practice in Kitchener since leaving the service. He was President of the Waterloo-Wellington Dental Society in 1972-73 and was a member of the Region of Waterloo District Health Council from 1977 to 1979.

Kerry is Chairman of the Commission on worship of St. Andrew's Presbyterian Church in Kitchener and is married and father of two sons.

His College activities include chairmanship of the Ad Hoc Committee on Supervision of Dental Hygienists and membership on the Discipline, Legal and Legislation, Ad Hoc Manpower and Quality Assurance Committees.



District 8

Randy T. Lang, D.D.S. represents District 8 which includes the Regional Municipalities of Halton, Hamilton-Wentworth, Niagara and Peel.

He attended Gordon Graydon and Richview Secondary Schools and received his D.D.S. from the University of Toronto in 1966.

Dr. Lang received his diploma in Orthodontics from the University of Toronto in 1969 and has practised that specialty in Mississauga since that time.

Dr. Lang is the orthodontic consultant to the Editorial Board of

Oral Health, is a member of the orthodontic teaching staff of the Faculty of Dentistry, University of Toronto and a past-president of the Ontario Society of Orthodontics. He has served as the orthodontic consultant to the Registration Committee of the R.C.D.S.

His College duties include the chairmanship of the Legal and Legislation Committee and membership on the Education, Professional Liability Insurance and the O.D.A./R.C.D.S. Liaison Committees.

UNIVERSITY REPRESENTATIVES



Gordon Nikiforuk, D.D.S. represents the University of Toronto, Faculty of Dentistry. He was born in Redfield, Saskatchewan and, after receiving his pre-dental training at the University of Saskatchewan, received his dental degree from the University of Toronto in 1947. He received his M.Sc. in Biochemistry from the University of Illinois

in 1950 and received a specialty certificate in paedodontics in 1955. He received his Fellowship in the Royal College of Dentists of Canada in 1966.

Gordon has had a distinguished academic career including service as Acting Dean, U.C.L.A. School of Dentistry, 1968-69 and Dean, Faculty of Dentistry, University of Toronto, 1970 to 1977.

He is currently Professor in the Department of Preventive Dentistry at the University of Toronto, senior staff dentist at the Hospital for Sick Children and the President of the Canadian Association for Dental Research.

He has received many honours during his career and has published over 80 papers relating to scientific and educational topics.

Among Dr. Nikiforuk's College responsibilities are membership on the Discipline, Professional Liability Insurance, Quality Assurance and Supervision of Dental Hygienists Committees.



J. Keith Hunter, D.D.S. is the University of Western Ontario representative. He was born in Lauder, Manitoba and attended secondary school near Hamilton. He graduated from the Faculty of Dentistry, University of Toronto, in 1958 and practised in Hamilton for 20 years before taking post-graduate course in Endodontics at the University of Michigan in Ann Arbor and receiving his M.Sc. degree.

He became certified as an Endodontist in late 1981 and holds a Fellowship in the International College of Dentists.

Keith is presently on staff of the Faculty of Dentistry, University of Western Ontario, serving as Chairman of the Division of Endodontics and lives in Schomberg, Ontario, where dairy farming and flying occupy his leisure time. He is Chairman of the Complaints Committee and sits on the Executive and Registration Committees of the College.

LAY REPRESENTATIVES

Provincial Legislation provides that the Council shall include between three and five persons who are not members of the College. The current lay representatives appointed by the Lieu-

tenant Governor in Council are Mr. James Monteith, Mrs. Eunice Swadron and the Rev. Rondo Thomas.



James Monteith was born in Fort Frances, Ontario and obtained his elementary and secondary education in Petrolia. He was an honour graduate in civil engineering from the University of Toronto in 1950.

Experience as a Soils Engineer in Ontario and as a Field Engineer for construction firms in New Zealand and Australia led to

his present role as a Consulting Civil Engineer with his own firm in Petrolia. Jim has a keen interest in flying and is a member of several professional associations. He enjoys tennis, golf and curling, is married and has two daughters.

He sits on the Complaints, Executive, O.D.H.A./R.C.D.S. Liaison and Ad Hoc Supervision of Dental Hygienists Committees.



Eunice Swadron was born and raised in Toronto and graduated from Lakeshore Teachers College in 1960. She taught for three years in Scarborough, is active in the Hadassah-WIZO organization and sits on the Synagogue Board for Beth Tikvah and is the President of her Sisterhood.

She is married and has three sons and enjoys boating and cross-country skiing with her family.

Her College activities include the Discipline, Registration, Legal and Legislation and Ad Hoc Manpower Committees.



Rondo Thomas was born in New Westminster, B.C. and attended school in Surrey, B.C. He served in the R.C.A.F. from 1957 to 1965 and graduated from the North West Bible College in Edmonton in 1969. He served as a Missionary in Frobisher Bay, N.W.T. for six years (1969 to 1975) and was ordained as a Minister in

1970. Rondo served as pastor of Flemington Pentecostal Church and as well on several interfaith chaplaincy committees at the provincial and federal levels.

He is married with four daughters and studies psychology in his spare time.

His College activities include the Discipline, O.D.A./R.C.D.S. Liaison and Ad Hoc Quality Assurance Committees.



Jocelyn Pearce is the hygienist representative for the Toronto area. She graduated from the University of Toronto dental hygiene program in 1976 and practises on a part-time basis. She lives in Thornhill, Ontario and spends her non-working hours looking after her husband and two children and enjoys crafts, cross-country skiing and cooking. She serves as the dental hygienist observer on several College committees including the Executive, Registration, Complaints, Legal and Legislation, R.C.D.S./O.D.H.A. Liaison, Ad Hoc on Manpower and Supervision of Dental Hygienists Committees.



Lynda Mickelson is the official dental hygiene observer representing all of the province except Toronto and York Region. She graduated in 1964 from the University of Toronto dental hygiene program. She is employed in private practice in Thunder Bay and also serves as a clinical demonstrator for dental hygiene at Confederation College.

She has been active in many dental and dental hygiene organizations serving as President of the Thunder Bay Dental Hygiene Society, Director of the O.D.H.A. and Chairman of Component Societies Liaison for that organization.

Lynda obtained her H.B.A. in philosophy in 1981 and continues her academic studies at Lakehead University. She and her husband, Harold, enjoy many outdoor activities.

Her College duties include the Education, Finance and Property, Professional Liability Insurance and R.C.D.S./O.D.H.A. Liaison Committees.

HYGIENIST OBSERVERS

In 1980, the Council of the R.C.D.S. approved the election of two dental hygienists as "official observers" who would be invited to participate in various committee work of the College when matters involving a dental hygienist or dental hygiene in general are discussed.

Staff

Dr. Kenneth F. Pownall, D.D.S.

Registrar,
Secretary/Treasurer

Dr. Edward Fox, D.D.S.

Deputy Registrar

- ☐ Discipline
- ☐ Malpractice
- ☐ Complaints

Dr. Donald McFarlane, D.D.S.

Assistant-to-the-Registrar

- ☐ Complaints Officer
- ☐ Education & College Publications
- ☐ Anaesthesia & Sedation

Mr. Frank Greer

Inspector

- ☐ Discipline
- ☐ Investigations
- ☐ Illegal Practice

Mrs. Linda D. Strevens, B.Sc.D.

Executive Assistant

- ☐ Education
- ☐ Auxiliary Liaison
- ☐ Investigations



Seated: Ted Fox, Ken Pownall, Linda Strevens

Standing: Don McFarlane, Frank Greer

Solicitors

Shibley, Righton & McCutcheon

Auditors

Thorne Riddell

Bankers

The Royal Bank of Canada



R.C.D.S. COUNCIL 1983-1984

Bottom Row: J.I.H. Fawcett (Vice-President), R.L.J. Fillion (President), K.F. Pownall (Registrar/Secretary), J.K. Hunter, G.E. Pitkin

Middle Row: R.T. Lang, R.P. Thomas, E. Swadron, L. Mickelson, L.V. Taylor, W.R. Hilliard

Top Row: K.S.M. Mathers, W.H. Treleaven, G. Nikiforuk, R.M. Matsui (Not Shown: J.A. Monteith, J.A. Pearce)

REPORT OF THE EDUCATION COMMITTEE

Chairman: R.M. Matsui, D.D.S.

Committee Members: W.R. Hilliard, D.D.S.,
R.T. Lang, D.D.S., L. Mickelson

The responsibilities of the Education Committee primarily involve:

1. The licensing of dental hygienists
2. The continuing education program of the R.C.D.S.

In 1983, the Committee spent most of its time on the issue of the Dental Hygiene Licensing Examinations due to the continued increase in the number of failing candidates.

DENTAL HYGIENE

At the licensing examinations held for out-of-province hygienists, 9 of 15 candidates failed (60%). Of the 13 out-of-province hygienists who tried a supplemental examination, 4 failed. Of the 165 Community College graduates who tried the R.C.D.S. licensing examinations, 61 failed (36.9%). At the supplemental licensing examinations, of the 59 Community College graduates who tried the examination, 16 failed.

In view of the significantly higher failure rate, the Committee carried out its own review of the conduct of the 1983 examinations. After considerable assessment and taking into consideration comments from all R.C.D.S. examiners, the Committee concluded that the 1983 results reflected the current status of the candidates presenting for licensure.

In order to determine some of the causes and possible solutions for the increased failure rate, the R.C.D.S. then met with representatives of the O.D.A., O.D.H.A., the Community Colleges and the Ministry of Colleges and Universities in various meetings. Of the many contributing factors it appeared that a lack of adequate clinical experience played a significant role in the higher failure rate. As a result, the Minister has struck a Task Force comprised of representatives of the above mentioned groups in order to address the problem and provide a workable solution.

Note: As mentioned in the 1982 Annual Report of the R.C.D.S., Council is currently recommending that the dental hygiene course become a true two-year program. However, it is possible that this position may be altered in the future.

CONTINUING EDUCATION

The R.C.D.S. Continuing Education program was again successful in 1983. (See following list.) Each dental society was offered two one-day lectures and one two-day seminar (or participation course) from the R.C.D.S. speakers list. Both dentists and dental hygienists took advantage of this subsidized program.

Due to a favourable response in 1983, the R.C.D.S. agreed to continue the co-sponsorship program of R.C.D.S./O.D.A. Courses for another year.



Seated: R.M. Matsui (Chairman), R.T. Lang

Standing: W.R. Hilliard, L. Mickelson

The R.C.D.S. Videotape Library Service continued to be well received by the members and the Committee is striving to enlarge its list of available videotapes.

The Committee is looking into the creation of a pool of multiple choice questions that can be offered to members as a means of self-learning and self-assessment. Furthermore, the Committee is also trying to obtain other material that could be provided to expand the continuing education service of the R.C.D.S. Council has directed the Committee to investigate the creation of refresher courses for those dentists, dental hygienists and expanded duty dental hygienists who might benefit from such a course (e.g. on referral by the Discipline or Complaints Committees).

An R.C.D.S. sponsored X-ray Safety Course approved by the H.A.R.P. Commission has been set up for dental assistants and will be offered in areas where there are no readily accessible Community College H.A.R.P. courses available. We note that the deadline for having taken such a course has been extended to July 1985.

The final draft of the Dentaguide was reviewed by the Committee and approved by Council for mailing to the membership.

Finally, Council approved in principle the idea that the R.C.D.S. consider instituting a program for educating the public with respect to dental services. The Committee will begin by first reviewing the studies available on the public's attitude towards it and its perception of dentistry.

ACKNOWLEDGEMENTS

The Education Committee has worked very diligently on your behalf and I would like to express my sincere gratitude to my Committee members for their clear thinking, expertise and commitment.

Dr. D. McFarlane, Mrs. L. Strevens and Mrs. O. Henry of the College staff have provided invaluable support and advice to the Committee and without whom we could not have performed our tasks so successfully. Their contributions are most heartily appreciated.

CONTINUING EDUCATION PROGRAMS – DENTISTS

Brant County Dental Society

Thursday, October 27, 1983

Ralph I. Brooke

"An Approach to the Diagnosis and Treatment of Oral Pain Including Temporomandibular Joint Problems"

Brockville Dental Society

October 21, 1983

Barry H. Korzen

"Demonstration Course in McSpadden Techniques"

Cornwall Dental Society

November 25, 1983

M. Suzuki

"Current Developments in Operative Dentistry"

Durham-Ontario Dental Society

January 28, 1983

A. Barry Chapnick

"Predictable Endodontics for General Practitioners and Obturation Using Thermally Compacted Gutta Percha"

February 23, 1983

Philip A. Watson

"Pot-Pourri of Restorative Topics" (Including, crown and bridge pontic form, metal ceramic fracture repair temporization in crown and bridge)

Elgin County Dental Society

January 14, 1983

David J. Kenny

"Guidance of the Developing Occlusion"

"Paediatric Restorative Dentistry and Pulp Therapy"

March 11, 1983

John H. Gryfe

"Surgery you can and should do in your office, and handling complicated surgery"

Elgin County Dental Society

October 21, 1983

Wm. K. Hettenhausen

"Generating Health in the Oral Environment"

"Nutrition for all Ages"

Essex County Dental Society

March 12, 1983

Donald R. Gratton

"Cast Etch Bridges (Maryland)"

"Everyday Approach to Occlusion"

Haldimand-Norfolk Dental Society

January 19, 1983

Steven Corber

"Recognition and Diagnosis of Periodontal Disease"

November 16, 1983

Makoto Suzuki

"Current Developments in Operative Dentistry"

Kenora Rainy-River Dental Society

April 22 and 23, 1983

Ewald Rathman and Lindsay Gibson

"Orthodontic Appliances"

"Review of Dental Anatomy"

November 4 and 5, 1983

John Curran

"Oral Surgery"

Kent County Dental Society

October 21, 1983

David Prentice

"Effective Persuasion"

Kingston Dental Society

April 15, 1983

Christopher McCulloch

"Developing Periodontics in a Private Practice"

October 28, 1983

E. Stangel

"Restorative Resins – Retrospective, Current Application and the Future"

Kirkland Lake Dental Association

April 22, 1983

Hugh F. MacKay and Irwin Lightman

"Geriatric Dentistry"

"Prognosis for the 80's"

Lambton County Dental Society

February 25, 1983

Paul S. Sills

"Modern Concept in Removable Prosthodontics"

London Dental Society

March 18, 1983

Stuart L. Fischman

"Cankers, Chancres, and Cancer" – Current concepts in Oral Ulcers

North Bay Dental Society

February 25, 1983

Bernard H. Dolansky

"Endodontics Today"

November 11, 1983

Jerome Becker

"Oral Pathology – Slide Quiz"

"Oral Surgery Emergencies"

Oxford County Dental Society

January 28, 1983

Robert S. Turnbull

"Periodontics for the General Practitioner"

Peterborough Dental Society

February 4, 1983

Charles O. Munroe

"Oral Diagnosis"

April 22, 1983

Keith C. Titley

"Treatment of emergency situations in Paedodontics"

September 30, 1983

William K. Hettenhausen

"Your teeth for a lifetime"

"Nutrition for all ages"

Porcupine Dental Society

April 15, 1983

Makoto Suzuki

"Restorative Dentistry"

April 29 and 30, 1983

Donald S. Moore and James E. Stakiw

"Complete Diagnosis and Treatment Planning with Emphasis on Periodontal and Restorative Considerations"

Renfrew County Dental Society

February 26, 1983

Samuel P. Kucey

"The Temporomandibular Joint in Function and Dysfunction"

Rideau Dental Society

April 15, 1983

Gurkan Altuna

"Removable and Functional Orthodontic Appliances for the General Practitioner"

November 11, 1983

Dorothy McComb

"New Developments in Dental Materials"

Sault Ste. Marie Dental Society

November 4, 1983

Philip A. Watson

"Fixed Prosthodontics"

Stratford Dental Society

March 25, 1983

Eric Freeman

"Periodontal Therapy – A Biological Approach for the 80's"

April 13, 1983

Aaron H. Fenton

"A Spectrum of Prosthodontics"

November 18, 1983

Colonel Keith Morley

"Management of the Dental-Phobic Child"

"Management of Abhorrent Habits in Children"

Sudbury Dental Society

January 21, 1983

S.M. Borden

"T.M.J. Pain – Dysfunction"

February 18, 1983

Gerald E. Pearson

"A Pot-Pourri of Periodontics"

December 2, 1983

Dorothy McComb

"New Developments in Dental Materials"

Thunder Bay Dental Association

April 23, 1983

Herbert J. Adirim

"Acupuncture"

Wingham Dental Society

February 23, 1983

John A. Reid

"Radiology"

October 19, 1983

Hugh F. MacKay

"Full Denture Prosthetics and Current Advantages with Ridge Augmentation and Implant Techniques"

Wingham Dental Society

November 6, 1983

Barry H. Korzen

"Endo/Perio Interrelationship-Periapical Procedures and a more recent update on Modes of Endodontic Techniques"

York Region Dental Society

January 21 and 22, 1983

Donald S. Moore and James E. Stakiw

"Management of Patients with TMJ Dysfunction Syndrome and Occlusal Problems"

November 4, 1983

H. Jack Stockton

"Investment and Tax Planning for Dentists"

Toronto West Dental Society

January 19, 1983

Bernard H. Dolansky

"Endodontics 100"

**CONTINUING EDUCATION PROGRAMS –
DENTAL HYGIENISTS**

Algoma Dental Hygienists' Society

April 9, 1983

Alan M. Crawford

"Orthodontics for the Dental Hygienist"

November 26, 1983

Wm. K. Hettenhausen

"Your Teeth for a Lifetime"

"Nutrition for all Ages"

Durham Dental Hygienists' Society

October 8, 1983

Victor Rausch

"Self-Hypnosis"

Essex Dental Hygienists' Society

February 12, 1983

Bryan J. Williams

"Orthodontics for the Dental Hygienist"

November 12, 1983

Wm. K. Hettenhausen

"Your Teeth for a Lifetime"

"Nutrition for all Ages"

Halton Peel Dental Hygienists' Society

May 28, 1983

Nina Burgess

"Nutrition Update for Dental Hygienists in Practice"

October 29, 1983

Jenny Thomas

"Utilization of a Dental Hygienist in Private Practice with
Emphasis on Periodontal Skills"

Hamilton Dental Hygienists' Society

November 19, 1983

Wm. K. Hettenhausen

"Your Teeth for a Lifetime"

"Nutrition for all Ages"

Lambton County Dental Hygienists' Society

November 26, 1983

Paul Stebbins

"Assertiveness Training"

London Dental Hygienists' Society

February 26, 1983

Francis H. Mader

"A Hygienist in an Orthodontic Practice"

Niagara Region Dental Hygienists' Society

May 7, 1983

Ronald F. Delia

"Orthodontic Update"

October 22, 1983

T.D. Daley

"Oral Pathology"

Nipissing Dental Hygienists' Society

March 19, 1983

D. Christopher Clark

"Preventive & Community Dentistry"

November 12, 1983

David M. Johnston

"Preventive Procedures for the Child Patient – an Update"

Ottawa Dental Hygienists' Society

March 5, 1983

John A. Reid

"Radiology in the 80's" Protection – Hazards – Interpretation"

November 5, 1983

Victor Rausch

"Hetero and Self-Hypnosis"

Peterborough Dental Hygienists' Society

October 28, 1983

David Mock

"Current Concepts in Oral Medicine and Pathology"

Sudbury Dental Hygienists' Society

April 30, 1983

Nina Burgess

"Nutrition Update for Dental Hygienists in Practice"

Thunder Bay Dental Hygienists' Association

March 12, 1983

William W. Dowhos

"Medical Emergencies"

June 4, 1983

Jenny Thomas

"The Utilization of the Dental Hygienist in Private Practice with
Emphasis on Periodontal Skills"

December 9, 1983

George Burgman

"Forensic Odontology"

Toronto Central Dental Hygienists' Society

March 12, 1983

Donald G. Tustian and L. Frances Greenwood

"Diagnosis and Treatment of TMJ Problems"

Toronto North Dental Hygienists' Society

February 19, 1983

Joan M. McGowan

"Current Concepts in Dental Hygiene which will include,
Blood Pressure, Preventive Dentistry, Fluorides and
Medical Histories"

November 12, 1983

Jenny Thomas

"Utilization of a Dental Hygienist in Private Practice with
Emphasis on Periodontal Skills"

Waterloo-Wellington Dental Hygienists' Society

March 5, 1983

Jenny Thomas

"Periodontal Philosophy and Mode of Practice into
General Practice"

SPECIAL GRANTS

Hamilton Academy of Dentistry

February 3 & 4, 1983
Bernard Dolansky
London & District Dental Society
October 28, 1983
Harry C. Lundeen
Northern Ontario Dental Association Convention
September 24 & 25, 1983
Rendezvous '83 - Thunder Bay
September 30 - October 1, 1983
O.D.H.A. Winter Clinic Day
November 1983

RADIATION SAFETY COURSES FOR DENTAL ASSISTANTS

Kingston
Dr. Ross Barlow and Dr. Paula Sikorski
September - October

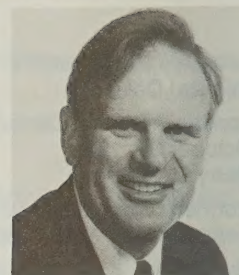
Kenora
Dr. Ross Barlow
November - December

Timmins
Dr. Paula Sikorski
November - December

U. of T. Report

REPORT OF THE DEAN OF THE FACULTY OF DENTISTRY UNIVERSITY OF TORONTO

A.R. TenCate, B.D.S., Ph.D.



This is my sixth report to the Royal College and I am pleased to inform Council that my constant concerns about outdated equipment over the past five years has been resolved in that our undergraduate clinical facilities have now been totally upgraded. There is still much to be done in the coming year and there will be inconvenience, but the clinical training of our students will not be curtailed in any way as remodelling of the Faculty continues.

RESIGNATIONS AND RETIREMENTS

Dr. J. Bigelow retired at the end of the academic year after 18 years of service. His function as patient manager has been assumed by Dr. E. Sonley.

APPOINTMENTS AND PROMOTIONS

Dr. Earle Young, appointed assistant professor (part-time)
Mr. A. Zeoli, appointed senior tutor
Dr. S.C. Small promoted to associate professor (part-time)
Dr. J. Leake, granted tenure as of July 1, 1983

INTRA FACULTY APPOINTMENTS

Dr. A.M. Hunt's term as chairman and director of graduate and post-graduate education expired June 30th this year and he has been succeeded by Dr. A.H. Melcher. In turn he has stepped down as director of the M.R.C. Group with Dr. J. Sodek assuming the directorship of the Group.

Dr. G.A. Zarb has been appointed chairman of the new department of prosthodontics. This appointment results from the integration of the subjects of fixed and removable prosthodontics, reflecting not only the C.D.A. definition of prosthodontics, but also a unification in the teaching of the restoration of occlusion.

RESEARCH LEAVES

Dr. A. Zarb is on a one year research leave. He is conducting research in Sweden and Switzerland on osseointegrated dental implants in partially edentulous patients.

Dr. D.L. Anderson is on a one year research leave studying the methodology of three-dimensional radiographic and nuclear magnetic resonance imaging. He is based at the Universities of British Columbia and California.

Dr. D.G. Woodside is on one year's research during which he is investigating bone remodelling using the Herbst appliance in primates.

Dr. A.M. Hunt is on a six months research leave in New Zealand and Australia where he is conducting a study into the methodology and results of national dental surveys.

EDUCATION

In the past academic year the University graduated 149 students from this Faculty as follows:

D.D.S.	127
B.Sc.D.	4

M.Sc.	2
Ph.D.	1
Diplomas	15
	149

The undergraduate intake for the 1983-84 session is 104, so our total enrollment now is:

Undergraduate	461
B.Sc.D.	3
Masters	23
Ph.D.	6
Diploma	41
Combined M.Sc./Diploma	7
Combined Ph.D./Diploma	2
Interns	28
	571

Mention must be made of the award of the Deans Gold Medal to Dr. C. Binert who received 39 honours. It is worth noting that this level of academic excellence is likely to continue as the academic profile of the entering class shows their average University mark to be 80%.

This year also saw the graduation of Dr. John Cox, the first graduate from our prosthodontic diploma programme and indeed the first graduate of a Canadian prosthodontic programme. Council should also be aware that, beginning in 1984, 2 year diploma programmes will be offered in dental radiology and dental anaesthesia. Previously dental anaesthesia was a one year B.Sc.D. programme and a training in radiology could only be obtained via the Masters programme.

With respect to our post graduate and graduate programmes, Council might be interested in the following quotation from an anonymous report provides to us with respect to the M.R.C. group renewal.

"Seven post-doctoral fellows and eighteen graduate students were involved in the group's activities. Nine of the graduate students received Ph.D. degrees in the past five years, six of whom had dental degrees. The training received by these individuals, most of whom also received specialty training in periodontics and orthodontics, has resulted in the development of highly trained and educated professionals who are needed and should be actively recruited by dental faculties across Canada. These highly trained individuals, and others with similar training are needed not simply to replace retiring faculty members, but to upgrade the quality of the entire dental academic establishment in Canada as well as most other countries. Despite economic pressures, the training of this trickle of highly needed individuals must be kept well supported to maintain, if not improve, the vitality and quality of Dentistry in Canada."

RESEARCH AND SCHOLARLY ACTIVITY

The Faculty continues to maintain the amount and quality of its research activity spearheaded this year by two major grants. The first is a new grant from the Medical Research Council for over \$1,000,000 to study the requirement for successful dental implants and the second is the renewal of the M.R.C. Group for a further five year period. I quote the comments of an orthopaedic surgeon concerning the implant project.

"I have been aware of the state of the art in dental implants for some years as a result of my attendance at meetings of the Biomaterial Society. The subject has been in the forefront of dental research for at least fifteen years and continues to be in disarray. The potential complications of the procedure are tremendous with associated morbidity. Most of the research has been empirical and "ad hoc" and most of it, unfortunately, has been done in humans. The potential value of this proposed project by Pilliar and his associates is almost immeasurable."

Add to these comments the fact that Toronto, in conjunction with Sweden, has been undertaking clinical trials, funded by the Ontario Government, on osseous integration put us, I believe, at the cutting edge of implant research. I stress these programmes as I think they illustrate well the amalgamation of basic and clinical research taking place in Toronto which undoubtedly will shortly impact on everyday clinical practice.

I also quote from the report of the site visit team (consisting of 3 Americans and one Canadian) assessing the past performance of the M.R.C. group.

"The group provides an excellent link between the research activities of the basic medical science faculty and the dental faculty and a superior training ground for dental researchers. It is beyond doubt the best dental research group in Canada and one of the best half dozen in North America - comparable with the N.I.H. funded dental research institutes."

Research grants received by the Faculty for 1983-84 are:

Dr. D.A. Deporter	Studies on the Pathogenesis of Periodontitis	34,344
Dr. R.P. Ellen	Towards the Cost of Purchasing Liquid Scintillation Counter	30,000
Dr. E.D. Fillery	Identification of Actinomyces Viscosus and Actinomyces Maeslundii in Disease Tissues	35,025
Dr. T.P. Howley	Development and Application of a Statistical Analysis of Zero-Peaked Distributions	4,052
Dr. J. Leake	Dental Health Care Evaluation Seminar	43,495
Dr. D.W. Lewis	Research Needs for Implementing and Effective Preventive Dental Strategy	25,025
Dr. D. McComb	Clinical Evaluation of Use of Newer Composite Resin	21,650
Dr. R. Pilliar	Study of the Requirements for a Successful Dental Implant	458,020
Dr. H.J. Sandham	LDH-Deficient Streptococcus Mutans for Prevention of Dental Caries	29,138

Dr. B.J. Sessle	Dental and Orofacial Pain: Brain Stem Mechanisms (U.S.)	71,720
Dr. B.J. Sessle	Neural Mechanisms of Orofacial Function	69,280
Dr. D.C. Smith	Wear of Dental Composites	33,390
Dr. D.C. Smith	Studies of Crystal Growth on Teeth and Bone	41,000
Dr. D.C. Smith	Studies of Dental Composite Resins Containing Durapatite	45,855
Dr. J. Sodek	MRC Group in Periodontal Physiology	701,765
Dr. A.R. TenCate (Dean)	General Support Research Grant	15,000

OUTREACH ACTIVITIES

Contracts have been renegotiated with the Federal Government to support our ongoing projects in Sioux Lookout and Moose Factory as well as that supporting the National School of Dental Therapy. This school has now moved from Fort Smith, N.W.T. to Prince Albert, Sask. Also the Ontario Government has provided funds to maintain the operation of our mobile dental clinic which provides service for the disabled.

DISTINCTIONS

Faculty have received numerous distinctions. Dr. A.H. Melcher served as President of the International Association for Dental Research during the past year. Dr. J.H.P. Main was president of the Royal College of Dentists of Canada and Dr. G. Nikiforuk is President of the Canadian Association for Dental Research. Dr. N. Levine is president-elect of the International Association of Dentistry for the Handicapped and Dr. A.R. TenCate is president-elect of the International Association for Dental Research. Dr. J. Dale has been elected a director of the American Board of Orthodontics. Dr. A.R. TenCate served as visiting professor of the University of Queensland and to the University of Dalhousie. Dr. J.H. Sandham was visiting professor at the University of Alberta. Dr. G. Nikiforuk received the Astra prize for meritorious research in the field of dentistry for children.

The post-graduate and graduate students in orthodontics at the University of Toronto won the Joseph E. Johnson Award for the most outstanding table display at the meeting of the American Association of Orthodontics held in Boston, Mass., May 1-4, 1983. The display, entitled "Clinical and Experimental Investigations of Herbst Appliance Therapy", won in competition against 63 other displays.

ISSUES

I have continually documented my concerns about fiscal support for the University system in Ontario in past reports to Council and do not propose to reiterate them except to state that they continue to exist and now seriously jeopardize the Faculty's ability to carry out all the functions expected of it. In this regard it is this continual erosion of financial support which led us to reduce in our enrollment as we struggle to maintain the quality of our programme with fewer dollars to work with.

However there is a major issue which Faculty Council has directed I bring to Council's attention and this concerns our accreditation status. From this report so far it is clear that the Faculty is active and indeed has achieved pre-emminence in the

international scene as a result of its scholastic endeavours – yet the undergraduate programme this year was conditionally accredited by the Canadian Dental Association and the inference might be that the scholarly activity is being achieved at the expense of undergraduate teaching. This inference is denied categorically for several reasons which Council should understand fully.

First, every effort is always made to protect and improve the undergraduate programme. The research prominence has been gained on the basis of “soft” money. All “hard” money positions in the past five years has been allocated to the clinical disciplines thereby strengthening the teaching in the undergraduate programme. Why then do we have a conditional accreditation? Four years ago the Faculty received the status of provisional accreditation which mainly reflected our outdated facilities together with some other concerns which will always be found in relation to any dental school curriculum. The status of provisional accreditation demanded a new survey and this took place this year.

The survey report of this year's visit is provided to Council and is, in our opinion a fair document and indeed is mostly laudatory of the Faculty's programmes. But we have been conditioned which means:

“On the basis of a site visit and an institutionally prepared prospectus this classification is granted to an educational programme where specific deficiencies or weaknesses are considered to be of such a nature that they can be corrected in a reasonable length of time, which is ordinarily defined as a period not to exceed two years. This accreditation classification is considered adequate to meet the eligibility requirements for licensure and board examinations. An institution receiving the status of **CONDITIONAL APPROVAL** must provide a progress report at the end of the first year.”

The Faculty took exception at being conditioned on the basis of this report and appealed – to no avail.

Issue is taken for the following three reasons. First, the survey report clearly indicated that all the concerns raised four years ago, bar one, were addressed, and corrected. What more can a Faculty do to remove its provisional status? Stemming from this is our second concern which is the harmful impact of a process which imposes conditions and then continues to find more conditions at the time of re-survey. A re-survey which is undertaken to ensure that the original conditions have been addressed. Such a system prevents any Faculty introducing change and evolving its curriculum. We think that this is what is happening in Toronto (we think as the conditions are not clearly stated) for some of the new conditions relate to our staged introduction of clerkship. We strongly believe that any accreditation system should not interfere with educational innovation as now seems to be happening. Third, the Faculty is well aware of many of the concerns listed in the survey report and has given much thought to, and arrived at solutions for them which are possible in the Toronto milieu. We are therefore both not able or willing to meet some of the conditions mentioned in the survey report and the future implications are obvious.

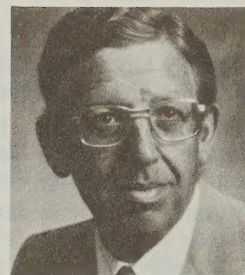
These three issues were the basis of our appeal and our concerns were not heeded. I am concerned about the impact this decision has on the student body, the faculty and the profession. Sadly if we make a serious issue of this matter it is the student population that suffers should accreditation be ultimately lost. The College is responsible for licensure and, according to the

survey report, finds our product satisfactory. We need the support of the College, if it believes the Faculty's arguments are sound, to correct what we see as flaws with potentially serious consequences in the current accreditation process. It should be remembered that dentistry has the privilege of being University based. It is within the University system that the limits of knowledge are expanded and future leaders and scholars educated and it is within this framework that the Universities not only teach but determine what should be taught. This privilege should not be compromised by an accreditation process – no matter how well meaning. It is for this reason that Faculty Council has directed that the College receive all the accreditation documentation so that it can assure itself of the calibre of our undergraduate programme.

U.W.O Report

REPORT OF THE DEAN OF THE FACULTY OF DENTISTRY UNIVERSITY OF WESTERN ONTARIO

Ralph I. Brooke, B.Ch.D., L.D.S., F.D.S., R.C.S., M.R.C.P., L.R.C.S.



FINANCING

The Faculty of Dentistry remains on the academic maintenance program. Although this enables the Faculty to maintain its undergraduate and graduate programs at an acceptable level, it is unfortunate that, at a time when the Faculty wishes to expand its research program, additional funds will not become available.

Discussion continues with the University administration about the reduction of the class size from 56 to 40 students. It was hoped that there would be a decision from the Ministry during the year about a change in the funding system. Until there is some change in this direction, it will prove very difficult to make a reduction in the student numbers. It is hoped that some definitive plans will be made in the fall of 1983.

FACULTY RETREAT

A Faculty Retreat was held on November 20, 1982. A wide range of topics was discussed including research, teaching, faculty development, and a proposed reorganization plan.

REORGANIZATION OF THE FACULTY

On July 1st, 1983 the Faculty of Dentistry was reorganized. Departments have been discontinued but the Divisions remain as before with the addition of a Division of Oral Biology. It is hoped the newly organized Faculty will give better continuity of committee function and allow senior administrators to be involved in faculty-wide decision making. It is hoped that there will be new thrusts in the areas of research and continuing education.

To fulfill these objections, four new positions have been created.

Dr. Ronald E. Jordan – Associate Dean for Clinical Affairs
Dr. David W. Banting – Associate Dean, Academic
Dr. John T. Hamilton – Assistant Dean, Research
Dr. Gerald Z. Wright – Assistant Dean, Continuing Education

AWARDS

A sum of more than \$25,000 has been contributed to the Wesley and Jean Dunn Fellowship. This should provide \$2,500 annually to a student entering a graduate program.

The Alpha Omega Award has been reinstated and three new Quintessence Publishing Awards have been instituted. The Pro Liberis Prize has been increased from \$50 to \$500.

NORTHERN OUTREACH PROGRAM

A Northern Outreach Program has been established. Initially, a pilot study will be conducted with four students travelling north for a period of one or two weeks. These students will be involved with instruction of classes on the importance of dentistry and oral hygiene techniques, etc. In addition, students and interns from Western will be involved with the Federal Northern Program, travelling out to Moose Factory and Sioux Lookout. The cooperation of the Faculty of Dentistry of the University of Toronto in this

project is greatly appreciated.

FACIAL PAIN RESEARCH UNIT

A Facial Pain Research Unit has been established. The Unit will be involved in both clinical and basic science research. It is hoped to recruit clinicians and basic scientists in this area who will devote at least 50% of their time to research. The financial restraints referred to above will, hopefully, not make progress of this unit too slow.

ACFD CONFERENCE ON GERIATRIC DENTISTRY

A most successful and well attended Conference was held on this subject from February 28th to March 2nd, 1983. The Conference was organized by Dr. David Banting and he is to be congratulated on the effectiveness of the program.

ADMISSIONS

Three hundred and seventy-one (371) applications were received for the 56 positions in the first year. The academic average based on the best two years preceding admission was 78.2%. Twenty-five (25) of the 48 class members who received their high school education in Ontario, were Ontario Scholars. The average manual score within the Dental Aptitude Test was 5.7. The steep decline in applications which is being experienced by many other schools has, at the moment, not become apparent at Western.

The interview study is continuing.

The tuition deposit has been raised substantially as it has been found in previous years that several students do not inform the Registrar's Office that they are intending to take up a place in a school other than Western. It is hoped that this increase in tuition deposit will help to overcome the problem.

RESEARCH

This year has shown a substantial increase in both internal and external funding of research. The following research projects were initiated or approved during the 1982-83 year.

External Research Grants, 1982-83

Admissions Committee, \$758 from the Ontario Dental Association, Summer 1982, for study to determine the effectiveness of student interviews in the selection process of applicants for admission to dental school

Banting, D.W. and A.M. Hunt, renewal grant of \$39,600 from the National Health Research Development Program, July 1981 – March 1983, "Atlantic Canada Children's Oral Health"

Galil, K.A., I.D.F. Schofield and G.Z. Wright, renewal grant of \$26,379 from the Ontario Ministry of Health, March 1983 – March 1984, "Application of Tissue Adhesives in Oral Surgery"

Hamilton, J.T. and I.D. Schofield, \$3,000 from Canadian

Hoescht Ltd., 1982-1983, "Multicentre Study of Analgesic Activity of Carticaine (Ultracaine - DS and Ultracaine - DS Forte)"

McGrath, P.A. and R.I. Brooke, \$20,084 from Ontario Ministry of Health, April 1983 - March 1985, "Analgesic Efficacy and Patient Expectation for Pain Relief"

Parnell, A.G. and A. Jarvis, \$6,675 from the Sterling Drug Co., March - June 1983, "A Double-Blind Intra-Individual Study to Compare Carbocaine (Mepivacaine) 3% at two Different pH Levels in Dental Infiltration Anaesthesia"; and "A Double-Blind Intra-Individual Study to Compare Marcaine (Bupivacaine) 0.5% with Epinephrine (1:200,000) vs Xylocaine (Lidocaine) 2% with Epinephrine (1:100,000) in Dental"

Internal Research Grants, 1982-83

Charles D.H., \$6,000 from the Ontario Provincial Health Research grant administered by Vice-President, Health Sciences, June 1982 - March 1983, "The Use of Acid Etch Microparticle Filled Composite Materials in the Preparation of Abutment Teeth for Removal Partial Dentures"

Dunn, W.J. and B. Freedman, \$200 from the M.R.C. General Support grant, 1982-83, "Survey on Informed Consent Attitudes and Practices of Ontario Oral Surgeons and Hospital Dental Departments"

Gratton, D.R., R.E. Jordan and M. Suzuki, renewal of \$10,810 from the Ontario Provincial Health Research grant administered by Vice-President, Health Sciences, April 1981 - March 1984, "A Clinical Study of Conservative Cast Etch Fixed Anterior Prostheses"

Hunter, W.S. (on behalf of graduate students in Orthodontics), \$2,000 from M.R.C. general support grant, May 1983 - April 1984, to support research activities of graduate students

Johnson, L.N., \$1,676 from M.R.C. general support grant, June - September 1982, "Composition Determination Using X-Ray Diffraction" (in connection with M.R.C. undergraduate awards to B. Croppo and A. Klym)

Johnston, D.W., \$20,000 from the Academic Development Fund, May 1982 - April 1983, "Simulated Practice Environment Clinic Dental Teaching Program"

Jordan, R.E. and M. Suzuki, \$5,330 from Vice-President, Health Sciences (lottery funds), July 1982 - March 1983, "Investigation of 'Heavy Filled' Light Cured Composite Materials"

Jordan, R.E. and M. Suzuki, renewal of \$20,500 from the Ontario Provincial Health Research grant administered by the Vice-President, Health Sciences, April 1981 - March 1984, "A Clinical Investigation of Microparticle Filled Resin Materials"

Jordan, R.E., \$2,500 from M.R.C. general support grant, May 1983 - April 1984, "A Clinical Study of New Dentin Bonding Materials for Possible Use in Geriatric Dentistry"

Reid, J.A., \$3,110 from M.R.C. general support grant, May 1983 - April 1984, "Production of a Data Base for the Assessment of the Radiation Hazard from the Use of Dental X-Ray Equipment"

Sills, P.S., and H.A. Leeper, \$18,000 from the Ontario Provincial Health Research grant administered by the Vice-President, Health Sciences, April 1982 - March 1983, "Changes in Speech Behaviour Using Palatal Lift Prosthesis"

Stakiw, J.E., \$1,650 from Foundation Western and the M.R.C.

general support grant, June 1983 - June 1984, "Development of Stereoscopic Photography to Measure Periodontal Bone Defect Volume"

Suzuki, M. and R.E. Jordan, \$3,310 from the Ontario Provincial Health Research grant administered by Vice-President, Health Sciences, July 1982 - March 1983, "The Reinforcement Potential of Posterior Composite Materials"

MRC VISITING PROFESSOR

Dr. Sheldon Roth, Associate Professor of Pharmacology of the University of Calgary, was the Visiting Professor from 15-18 March 1983. Dr. Roth, the 14th Annual MRC Visiting Professor, gave a stimulating public lecture and seminars to the graduate students and students and faculty of the Department of Pharmacology. His visit was of great benefit to the Faculty.

SUMMER SCHOLARSHIPS

The Faculty of Dentistry has joined the Faculty of Medicine in the more formalized two-year Summer Scholarship Program. Four students in the Faculty of Dentistry have been awarded Summer Scholarships by the Medical Research Council to work with faculty researchers in these summer projects. Recipients are:

Lisa Bonato, who is working with Dr. M. Evered, Department of Physiology, on "The Gastrointestinal Tract in Body Fluid Regulation"

Charles Frank, working with Dr. L.M. Johnson, Department of Restorative Dentistry, on "Castability and Accuracy of Fit of Base Metal Alloys Including a Nickel and Chromium-free Stainless Steel"

Kim Hansen, with Dr. R. Anderson, Department of Microbiology and Immunology, "Radioprotective Membrane Components of *Deinococcus Radiodurans*"

Charles Nagainis, with Dr. G. Chaconas, Cancer Research Laboratory, "Isolation of Bacteriophage Mu Transposase Protein"

ADA STUDENT CONFERENCE ON RESEARCH

Students from Year II, who ranked in the top third of the class after first year, were invited to submit written applications to attend the 19th Annual ADA Student Conference on Research held at the University of Connecticut on 17-19 April 1983. Five students submitted applications from which Ms. Carolyn Mason was selected to attend as the school's representative.

CLINICAL RECORDS

The clinic records have now been computerized. It is felt that the present computer size might soon be insufficient for the Faculty needs as many other uses of the computer, ranging from grading of students to use for research projects, are envisaged.

ANNUAL PAEDIATRIC AND COMMUNITY DENTISTRY LECTURE

Dr. S.H. Wei, Head of Pedodontics at the University of Iowa, was the inaugural lecturer at the Annual Lecture in Paediatric and Community Dentistry. The lecture is sponsored by UWO Faculty of Dentistry alumni and friends to honor the contributions of Dr. W.H. Feasby, the former Chairman of the Department. Dr. Wei lectured on "Preventive Advances in Pediatric Dentistry".

CONTINUING EDUCATION

Twelve continuing education courses were given during the 1982-83 academic year and they were all well-attended.

STUDENT PERFORMANCE

The following are the results of student performance for the academic year 1982-83:

Fourth Year: 52 students, out of which 9 achieved honours (3 with distinction), 43 passed and none failed.

Third Year: 54 students, out of which 8 achieved honours, 35 passed, 11 passed with conditions and none failed.

Second Year: 56 students, out of which 8 achieved honours, 43 passed, 5 passed with conditions and none failed.

First Year: 56 students, out of which 8 achieved honours, 33 passed, 13 passed with conditions and two failed.

LONDON & DISTRICT DENTAL SOCIETY CLINIC NIGHT

Five excellent presentations were made by members of the Third Year class at the 1982 Student Clinic Night of the London and District Dental Society. Mr. Glenn Morawetz's presentation was adjudged to be the most meritorious and he represented the school at the annual meeting of the Canadian Dental Association, in Vancouver, in September 1983.

The following presentations were made:

A. Burgoyne - "Resin Chemistry as it Applies to Clinical Dentistry"

A. Klym - "Full Denture Relines Using Functional Impression Materials"

J. Mark - "The Gow-Gates Technique for Mandibular Anaesthesia"

G. Morawetz - "Hepatitis B - Dental Implications"

G. Spagnuolo - "Vital Tooth Bleaching"

ADVISORY COMMITTEE TO THE FACULTY OF DENTISTRY

The Advisory Committee to the Faculty held its annual meeting on November 29, 1982. There was a wide range in consideration of topics and many interesting and useful points were raised.

CONCLUSION

The main changes which have occurred during the past academic year have been the reorganization of the Faculty and a realistic assessment of the Faculty's research and teaching potential. In all these matters, I wish to thank the members of the faculty and support staff for their advice and constant help throughout the year. I hope that, with the newly-organized Faculty, we have a basis for strengthening what is already a strong undergraduate program and moving forward in the area of clinical and basic science research.

REPORT OF THE FINANCE AND PROPERTY COMMITTEE

Chairman: W.R. Hilliard, D.D.S.

Committee Members: J.I.H. Fawcett, D.D.S.,
W.H. Treleaven, D.D.S., R.L.J. Filion, D.D.S.
Lynda Mickelson

GENERAL COMMENTS

The Finance and Property Committee met a number of times this year rather than just at budget time. Extra meetings were called to discuss the need for expanded accommodation and possible relocation. The services of the Consultant firm of Lavenhol, Horvath were obtained to help us evaluate our space needs. This process of accommodation planning will be ongoing in 1984.

FINANCIAL OVERVIEW

The College's overall financial picture remains sound. Surplus funds exist from previous budgets and we enjoy accumulated interest on these funds. However, due to increased expenditures and activities of the College, current expenditures may exceed revenues as noted in the Treasurer's Report in the 1982 Proceedings, therefore, operating capital may have to drawn from past surpluses. As well, renovations or purchase of alternate accommodation will have a marked effect on our budget. As you probably are aware, our licence fees have not been increased for a number of years and are in the lowest in Canada but this may have to change.

BUDGET HIGHLIGHTS

The Committee met on October 5, 1983 to set the proposed budget for 1984. The budget was approved by Council at the November, 1983 meeting and details follow.

INCOME:

a. Fees & Registration – Dentists:

Present members	5011
Additions	149
TOTAL:	5160
Annual fee	5160 x 325 = \$1,677,000
Registration	149 x 100 = 14,900
TOTAL:	\$1,691,900

b. Fees & Registration – Hygienists:

Present members	2225
Additions	175
TOTAL:	2400
Annual fee	2400 x 50 = \$ 120,000
Registration	175 x 25 = 4,375
TOTAL:	\$ 124,375

c. Interest:

Interest is derived from our investments. It is difficult to project



Seated: L. Mickelson, W.R. Hilliard (Chairman)

Standing: J.I.H. Fawcett, W.H. Treleaven

future interest rates at this time.

d. Examination Fees – Hygienists:

This item includes income from general licensing examinations, supplemental examinations and expanded duty examinations.

e. Professional Liability Insurance:

This is the charge paid to the College from the P.L.I. fund for the costs of the day-to-day administration of the plan. It is increased 10% from last year.

f. Sundry:

This includes income from fines for late payment of annual fees, rent from the caretaker's apartment and the sale of the list of members to dental related companies.

g. Continuing Education:

Each dentist pays \$35.00 for College-sponsored continuing education programs. The fee for hygienists is \$25.00

EXPENSES:

h. Salaries and Charges:

Increases in salary for 1984 are in the range of 4%–9%. An increase in staff may be required in 1984.

i. Postage and Courier:

An increase is anticipated because of an increase in the number and frequency of mailings to the members.

j. Stationery and Printing:

An increase is necessary because of an increase of quantity.

k. Telephone:

The College purchased its telephone system in 1982 and 1983. The budget cost is for the Bell trunk and long distance calls.

l. Equipment:

This item includes the cost of the maintenance contracts on our

equipment; i.e. computer, word processing, duplicator and typewriters. Our I.B.M. duplicating machine is leased. We require a new printer for the word processing equipment, additional software for the computer, two typewriters, filing cabinets, etc.

m. Property:

This includes the cost of caretaking, taxes, insurance, supplies, etc.

n. Council Honoraria:

This is a difficult item to budget because it depends on the number of meetings that the Council requires to do its business. The proposed increase of the honoraria is 4%.

o. Continuing Education:

These are the expenses associated with the many lectures and courses provided by the College for dentists and dental hygienists.

p. Professional Fees:

This item is mainly legal fees, but also includes the auditors' fees.

q. Council Expenses:

This is the cost of travel and accommodation for members of Council on College business.

r. Sundry Expenses:

These are minor expenses that do not fall into any other category.

s. Examinations:

These are the expenses associated with the cost of conducting examinations for dental hygiene licensure and for expanded duty dental hygienists qualifications.

t. Staff Travel:

The duties of the College are such that a considerable amount of staff time is spent on travel.

u. Council Insurance:

This is accident insurance to cover members of Council and clinicians who might be injured or killed while on College business.

v. Professional Liability Insurance:

This amount is based on a grant of \$140.00 per dentist an increase of \$25.00 per dentist from 1983.

w. Student Relations:

This is a contribution towards a reception for dental students at the time of licensing.

x. Dentaguide:

This is the cost of the printing of copies of the revised Dentaguide. No expenses are anticipated in 1984.

y. Grants:

This includes grants to The University of Western Ontario, the University of Toronto, the Canadian Fund for Dental Education and the Canadian Dental Association. There is an increase in the value of the R.C.D.S. scholarships offered to our universities.

z. Consultants' Fees:

These are the fees for consultants to assist with special projects that may be required from time to time.

aa. Radiation Safety Survey:

This was a survey conducted in 1982. It involved dentists exposing

a special x-ray film in their office and returning it to the College for analysis.

bb. Building Fund:

This is a new item and the budget calls for an initial sum of \$200,000 to be set aside for the purpose of the establishment of a fund to be used for the purchase of land and/or the purchase of a building, and/or the construction needs as the Property Committee may determine from time to time having obtained Council approval.

DEFICIT:

While the anticipated deficit is substantial we have reserve funds at this time that will permit this expenditure without the need to borrow money.

1984 BUDGET

1984 BUDGET INCOME (Total \$2,037,275)



1. Fees – Dentists
2. Fees – Dental Hygienists
3. Interest
4. Examination Fees and Continuing Education
5. P.L.I. and Sundry

INCOME	Actual 1982	Budget 1983	Actual to Sept. 30	Budget 1984
a. Fees & Registration – Dentists	\$1,586,435	\$1,611,800	\$1,651,180	\$1,691,900
b. Fees & Registration – Hygienists	108,678	114,500	114,060	124,375
c. Interest	248,052	175,000	91,543	100,000
d. Examination Fees	42,800	35,000	37,975	35,000
e. P.L.I. Income	20,000	30,000	30,000	33,000
f. Sundry Income	14,023	11,000	6,885	8,000
g. Continuing Education	56,531	45,000	41,000	45,000
Total:	\$2,076,519	\$2,022,350	\$1,972,643	\$2,037,275

EXPENSES

h. Salaries & Charges	\$ 423,349	\$ 506,000	\$ 357,718	\$ 590,000
i. Postage & Courier	37,481	45,000	45,745	70,000
j. Stationery & Printing	71,163	90,000	76,357	100,000
k. Telephone	16,029	34,000	29,808	17,000
l. Equipment	33,739	90,000	77,758	50,000
m. Property	80,127	67,177	45,196	63,150
n. Council Honoraria	177,719	190,000	192,500	225,000
o. Continuing Education	85,831	70,000	50,530	80,000
p. Professional Fees	189,032	180,000	165,700	200,000
q. Council Expenses	72,396	70,000	80,530	85,000
r. Sundry Expenses	6,915	5,000	4,076	6,000
s. Examinations	34,060	45,000	36,897	45,000
t. Staff Travel	43,604	60,000	39,000	60,000
u. Council Insurance	1,495	1,600	1,495	1,600
v. P.L.I. Premium	551,540	565,800	571,320	743,260
w. Student Relations	—	1,000	685	1,000
x. Dentaguide	—	25,000	20,101	—
y. Grants	32,743	36,550	31,420	39,125
z. Consultants' Fees	14,081	10,000	800	1,500
aa. Radiation Safety Survey	22,638	—	—	—
bb. Building Fund	—	—	—	200,000
Total:	\$1,894,942	\$2,092,127	\$1,827,635	\$2,577,685
Surplus or (Deficit)	181,577	(69,777)	145,008	(540,410)

1984 BUDGET EXPENSES (Total \$2,577,685)

28.8%	Professional Liability Insurance
25.2%	Salaries and Staff Travel
12.1%	Council Honoraria and Expenses
7.8%	Legal and Accounting Fees
7.5%	Postage, Courier Charges, Printing, Supplies, Telephone & Sundry
4.4%	Property Expenses, Taxes and Equipment
4.8%	Continuing Education and Examinations
1.6%	Grants, Student Relations, and Consultant Fees
7.8%	Building Fund

Registration

REPORT OF THE REGISTRATION COMMITTEE

Chairman: L.V. Taylor, D.D.S.

Committee Members: J.K. Hunter, D.D.S.,
E. Swadron

Hygienist Observer: J.A. Pearce

APPLICATION FOR CERTIFICATION

The following applications for certification as Specialist were approved by the Committee in 1983:

Dental Public Health: Dr. Shivroop Kishore Tandan.

Endodontics: Dr. Jeffrey J. Grossman; Dr. Brian David Jafine;
Dr. Lyon Jacob Schwartzben; Dr. Philip Shedletsky.

Oral & Maxillofacial Surgery: Dr. Michel Chagnon; Dr. Charles Levi Consky; Dr. Aron Gonshor; Dr. David J. Psutka; Dr. Allan Martyn Rees; Dr. George Kalman Bill Sandor; Dr. Leicester Anthony Smart; Dr. Daniel Joseph Tomlak; Dr. Douglas Joseph Vincelli.

Orthodontics: Dr. Robert Gregory Boyko; Dr. John Frederick Kalbfleisch; Dr. Ralph Albert Latham; Dr. Cheslea Peter MacNeil; Dr. Margaret Goldsmith McGillis; Dr. Ronald Arthur McWade; Dr. Glasspole Albert Pickersgill; Dr. Richard Philip Walker.

Paedodontics: Dr. Clive Meyer Friedman.

Periodontics: Dr. Eugene Kryshalskyj; Dr. Brian Edward Reed; Dr. Robert Bruce Sutherland.

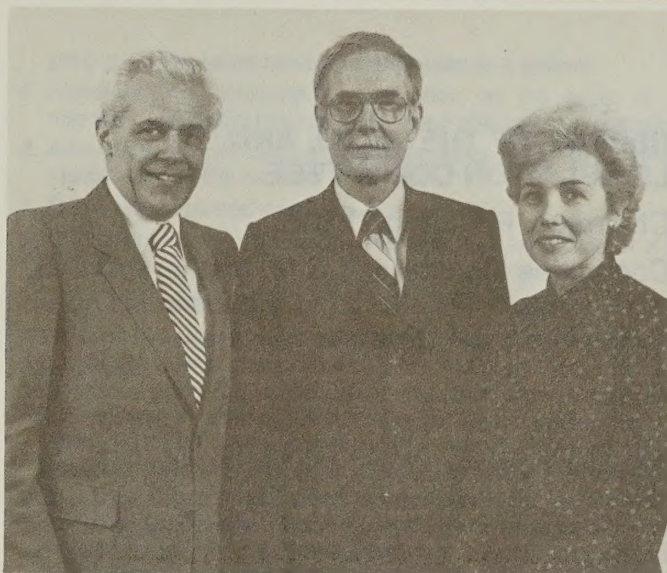
Prosthodontics: Dr. John Frederick Cox; Dr. Kenneth Stanley Hebel; Dr. Herman Karabet Kupeyan; Dr. Dennis Daye Yokota.

Graduates of Canadian dental schools who elect to apply for an N.D.E.B. certificate before March 31st of their graduating year, are granted an N.D.E.B. certificate without examination. This is possible because of the on-going process of accreditation of undergraduate, graduate, and postgraduate programs, in Canadian dental schools. Such certificate is accepted as the education qualification for licensure in Ontario, for up to five years. However, if issued more than five years previously, successful completion of the Part III (clinical component) examination, is required. Of course, all other requirements as set out in Section 26 of the Regulations, must be met, for the issuing or reissuing of a licence for the general practice of dentistry in Ontario.

The Committee met five times in 1983, to consider applications for licensure and/or certification as specialists. The Committee interviewed eight applicants personally, and also attended three hearings before the Health Disciplines Board. A more complete report may be made at a later date, when the time limits for the right of further appeals will have expired.

SPECIALTY CONSULTANTS

The Committee is grateful to our consultants, whose expertise is invaluable in assisting the committee in its deliberations regarding certification.



J.K. Hunter, L.V. Taylor (Chairman), E. Swadron

APPOINTED BY R.C.D.S.

DENTAL PUBLIC HEALTH

Dr. Neil A. Farrell

ENDODONTICS

Dr. Joel J. Edelson

ORAL PATHOLOGY

Dr. John Pedler

ORAL RADIOLOGY

Dr. D.W. Stoneman

ORAL & MAXILLOFACIAL SURGEONS

Dr. John M. Armitage

ORTHODONTICS

Dr. B. Hemrend

PAEDODONTICS

Dr. G.Z. Wright

PERIODONTICS

Dr. James E. Stakiw

PROSTHODONTICS

Dr. Paul S. Sills

BY SPECIALTY GROUP

Dr. James L. Leake

Dr. Arthur I. Arshawsky

Dr. D.G. Gardner

Dr. S.M. Fireman

Dr. George C. White

Dr. R. Bozek

Dr. F. Pulver

Dr. H. Freedman

Dr. B.L. Pedlar

As Chairman, I want to thank the Committee members and the Registrar, Dr. Pownall, for their assistance and sound advice.

REPORT OF THE LEGAL AND LEGISLATION COMMITTEE

Chairman: R.T. Lang, D.D.S.

Committee Members: K.S.M. Mathers, D.D.S.,
W.R. Hilliard, D.D.S., J.I.H. Fawcett, D.D.S.,
E. Swadron, J.A. Pearce

HEALTH PROFESSIONS LEGISLATION REVIEW

The Minister of Health has named a health professions legislation review team that will make recommendations about which health professions should be regulated by statute and how statutes governing the professions should be updated.

The last overhaul of legislation began with the report of the Committee on the Healing Arts in 1970 and culminated in the Health Disciplines Act, 1974. Such a review happens only once every decade or two and we at the College believe it is of extreme importance to the future of dentistry.

By enacting the Health Disciplines Act of 1974, the government confirmed the "college system" of self-regulation for the professions of dentistry, medicine, nursing, optometry and pharmacy. The Act established new structures and procedures for ensuring due process in decisions concerning complaints, discipline and registration. It also created the Health Disciplines Board to offer health care consumers a non-judicial avenue of appeal from any decision by one of the colleges.

The five professions under the Health Disciplines Act are the ones with the most modern legislation. A further five professions, including chiropractic and physiotherapy are governed by the Drugless Practitioner's Act enacted in 1925 with regulations revised in 1955. Then there are five separate acts for specific professions, such as psychologists and chiroprodists.

Finally, we have a host of other health care groups, many of which have been engendered by new technology. I refer here to such groups as ultrasound technologists and pulmonary-cardiovascular technologists for whom there is no specific statutory regulation.

Virtually all of these groups are seeking legislative changes. Those health professions governed by the Health Disciplines Act wish changes in the act. Some of those health professions governed by other acts want to come under the aegis of the Health Disciplines Act and many health professions without an act want one.

Initially, the review will determine the form under which currently regulated health professions should continue to be regulated. It will also determine which currently unregulated professions should be brought under the regulatory umbrella. More than 25 professions currently unregulated by statute have indicated a desire for some form of statutory regulation.

The appropriate form of regulation will also have to be decided. Some professions are seeking full-fledged self-regulation along the lines of The Health Disciplines Act. At the other end of the spectrum, professions may prefer regulation in



Seated: E. Swadron, R.T. Lang (Chairman)

Standing: K.S.M. Mathers, W.R. Hilliard, J.I.H. Fawcett

combination with other disciplines under a single governing body.

Perhaps the most important objective of the review is to settle an array of outstanding issues among several of the health care professions. For example, almost all unresolved regulatory issues involve disagreements between adjacent professions about their respective scopes of practice and their role in the delivery of health care.

The review team will consider if the legislation for each profession should define the scope of practice, and if so, what that definition should be. It will ask if licenses should be granted conferring an exclusive right to practice, and it will consider alternatives, such as permitting specified overlapping scopes of practice or certification i.e. restricting the use of a specified title without restricting the area of practice.

In the fall of 1983, the review team circulated a detailed list of 22 topics for the consideration of all health disciplines, as well as to organizations representing institutions which employ, train or bargain for health professionals, and to consumer and advocacy groups.

The R.C.D.S. submitted a brief replying to the 22 topics in the fall of 1983. Since this is an open, public process, all submissions are available to the other participants in the review for their reaction and comment. The review team is now evaluating all this feedback to identify the areas of agreement and disagreement.

The second phase of the review consists of intensive consultation with all interested parties and will begin to develop proposed solutions to regulatory issues.

The review team is also completing a comprehensive survey of the way other jurisdictions in North America, Western Europe, Australia and New Zealand have handled regulatory issues. This includes both a literature search as well as direct contact with officials administering the legislation and with critics and commentators.

The timing of this second phase depends on the number,

depth and complexity of the contentious issues that emerge. While a deadline cannot be set at this time, the overall schedule is aiming for specific recommendations that can be incorporated into legislation by February 28, 1985.

The reaction to these plans thus far has generally been enthusiastic. Most participants, including the R.C.D.S., are pleased the review is being conducted and appreciate the open format and the opportunity for informal dialogue.

In health care planning, we must recognize the interdependence of all the various disciplines and the need for greater co-operation. The review process, I am confident, will bear fruit; but it will do so most easily and beneficially if all participants keep foremost in mind the commitment which we must all share – to protect and promote the health of the people of Ontario.

USE OF THE TITLE "CLINIC" OR "CENTRE"

The Committee has drawn up tentative guidelines for the use of the words "dental clinic" or "dental centre". We have also submitted these guidelines to the Ontario Dental Association and the Ontario Association of Dental Group Practices together with a request for their input and recommendations.

These guidelines will be presented to Council at our May meeting for discussion and final approval.

SHADE VERIFICATION BY TECHNICIANS

The Royal College of Dental Surgeons and the Governing Board of Dental Technicians have agreed to an arrangement whereby a dentist could send a patient to a laboratory technician for "shade verification".

The "Terms of Understanding" between the R.C.S.D. and the G.B.D.T. are as follows:

1. It is understood by the patient, the dentist, and the laboratory personnel that the referring dentist is ultimately responsible for the shade selection or custom staining.
2. It is understood that laboratory personnel will not place or remove any crown (temporary or otherwise), or perform any intra-oral procedure, or suggest to the patient that he/she does so.
3. Written instructions concerning the tooth (or teeth) requiring shade verification or custom staining, duly signed by the dentists, must be supplied to the laboratory in advance of the procedure being performed.
4. Shade verification or custom staining of etch-bonded bridges is to be done only prior to fabrication.
5. Dentists are not to routinely refer patients to dental laboratories for shade verification or custom staining.
6. The dental laboratory may charge only the dentist for shade verification and/or custom staining.

DUTIES OF REGISTERED NURSES

A "Memorandum of Understanding" has been reached between the R.C.D.S. and the College of Nurses regarding 5 duties that nurses will be able to perform in a dental office under the *direct* supervision of the dentist.

Each of the 2 Colleges involved agrees that these duties fall both within the practice of Nursing and Dentistry.

The five duties are as follows:

1. Starting an intravenous procedure on the order of a member,

present in the same room and attending to a patient.

2. Administering intravenous medication on the order of a member, present in the same room and attending to a patient.
3. Administering per rectum, subcutaneous or intramuscular medication on the order of a member.
4. Removing intra-oral and extra-oral sutures.
5. Changing intra-oral and extra-oral dressings on the order of a member.

CAPITATION

The Committee and the entire Council are very much opposed to any type of dental pre-payment plan that does not give the patient the freedom of choice of dentist. Capitation is definitely not in the best interest of the public or the dental profession.

When informal representations to control Capitation were made to Murray Thompson, the Superintendent of Insurance, and Robert Elgie, the Minister of Consumer and Commercial Relations, the College was informed that Capitation did not appear to come within that Ministry's jurisdiction.

Fortunately, however, our 3 lay members of Council – Mr. Monteith, Mrs. Swadron and Rev. Thomas – have graciously offered to meet directly with representatives from the Ministry of Health to discuss the seriousness of the Capitation issue.

DISCIPLINE HEARINGS

The Committee is currently examining and comparing the Discipline procedures used in our College and in other Colleges.

In particular, the Committee is considering the use of a separate panel of lawyers for Discipline Hearings and the use of an independent legal Council to advise the Discipline Committee.

INCREASED REPRESENTATION ON COUNCIL

Council has agreed that, in order to spread the growing work load of Council, the number of elected Council members should be increased.

The Committee is currently discussing the number of new Council members required and the districts from which they should be elected.

CONCLUSION

As Chairman of the Committee, I would like to thank the members of my Committee and the staff of the College for their kind assistance and support.

I would like to thank the many members of our profession who have taken the time to inform me of their views and concerns on the many topics under the consideration of the Legal and Legislation Committee.

I encourage all members of our profession to let the College know your views on the subjects that are important to you. When decisions concerning your professional lives are about to be made, your input is extremely vital.

REPORT OF THE PROFESSIONAL LIABILITY INSURANCE COMMITTEE

Chairman: L.V. Taylor, D.D.S.

Committee Members: R.T. Lang, D.D.S.,
G. Nikiforuk, D.D.S., R.N. Jack, D.D.S.,
L. Mickelson

The continuing success of this program has been built upon the accumulated experience and foresight of many individuals over the years. In the 1930's, 1940's and 1950's, the Dentists' Legal Protective Association charged a premium of two dollars per member per year. This provided fairly adequate legal protection at a time when few claims were made, but prudence dictated a more extensive coverage. In 1957, a group liability insurance plan was offered on a voluntary basis to dentists by the R.C.D.S., and in 1973, the present plan came into effect on a compulsory basis.

The public has been protected, as well as the profession, by ensuring that all dentists licensed in Ontario maintain uniform minimum coverage. Individual members and their patients are protected, even after a serious claim, which may not be the case if that dentist's policy were to have been purchased privately. These objectives have been achieved largely by in-house administration and by the self-insuring aspects of the plan.

Relatively small claims are met by our reserves, up to the limit of our stop-loss, passing on to the insurer only the severe losses. Retention and investment of our reserves have created in our hands the funds to meet our responsibilities, including administration, while limiting the liability of the College to a specific amount for each claim. Insurance coverage at the least possible cost per member has thus been possible. The stop-loss acts in conjunction with the group deductible, to limit the College's liability for all claims which may arise in a particular policy year.

Our plan also provides that increased coverage is available at an additional premium, from our insurer; and approximately 13% of Ontario dentists availed themselves of this in 1983. For your information some statistics are presented.

TABLE 1

PROVISION COMPARISONS

	1973	1983	1984
Limit of Liability (any one occurrence)	\$250,000	\$1,000,000	\$1,000,000
Group Deductible (any one occurrence)	5,000	25,000	25,000
Aggregate Deductible (stop-loss limit)	25,000	360,000	550,000



Seated: L.V. Taylor (Chairman), R.T. Lang

Standing: G. Nikiforuk, L. Mickelson

TABLE 2

ESTIMATED ASSETS AND LIABILITIES AS OF DECEMBER 31, 1983

ASSETS	1982	1983
Cash in Bank	\$ 56,619.15	\$ 61,618.96
(1) Securities	2,473,857.39	2,303,239.74
Interest bearing deposit with securities firm	1,760.00	10,659.52
	\$2,532,236.54	\$2,375,518.22
LIABILITIES		
(2) Provision for unsettled claims	436,964.68	482,806.30
(3) Provision for adjustors fees	151,865.35	123,600.00
Total estimated liabilities	\$ 588,830.03	\$ 606,406.30
Estimated surplus as of December 31st	\$1,943,406.51	\$1,669,111.92

EXPLANATORY NOTES

1. Securities - A mix of long and short term securities - value shown at cost
2. Provision for unsettled claims - The difference between the monies paid in the settlement of claims and our stop-loss limit for the years of coverage
3. Provision for adjustors fees - An estimate based on the numbers of outstanding claims and what, on experience to date, it will cost in adjusting fees to settle these claims

The audited figures for revenue and expenses for the Professional Liability Insurance Fund can be found in the Treasurer's Report, Appendix D.

TABLE 3

**EXPENSES INCURRED
FROM JANUARY 1, 1973 TO DECEMBER 31, 1982
RE: ALL CLAIMS**

	To Claims	To Adjuster	To Legal & Experts
Paid by Insurer	\$356,629 305,295*	\$ 17,631 17,586*	\$177,573 125,083*
Paid by R.C.D.S.	\$825,749 580,680*	\$451,669 343,533*	\$412,886 296,700*

*December 31, 1982 – comparable figures

TABLE 4

Year	Claims Filed	Claims Outstanding	
		Dec. 31/82	Dec. 31/83
1973	29	0	0
1974	60	0	0
1975	43	0	0
1976	69	0	0
1977	80	5	5
1978	102	5	3
1979	119	9	5
1980	103	21	14
1981	140	48	27
1982	153	130	42
1983	148		116
	1,046	218	212

The Committee urges all members to keep detailed accurate records that would support the finding that informed consent had been obtained prior to treatment; and to promptly report to our adjuster or to Dr. Fox or Dr. McFarlane or Dr. Pownall, any occurrence which might eventually be the basis of a claim.

ACKNOWLEDGEMENTS

I want to thank members of the Committee, and in particular Dr. Fox and the College staff, for the efficient administration of this plan which continues to admirably serve the profession and the public.

Inspection

REPORT OF THE INSPECTOR

Frank M. Greer



ILLEGAL PRACTICE OF DENTISTRY

There has been a decline in the number of complaints that have been brought to our attention concerning illegal practice.

From time to time we receive anonymous calls concerning illegal practice. Investigation of such cases is difficult. The courts require proper evidence (usually a person who has received the illegal service). Most people, even ones who have received dangerous treatment, are reluctant to get involved with courts. The best cases are ones where dissatisfied persons are so angry that they want the illegal practitioners put out of business.

a. St. Catharines, Ontario

Mr. Andrew Szucs, 64 Queenston St., St. Catharines, Ontario, who is not licenced to practice dentistry, placed a crown on a tooth for Mr. J. Pilato and charged him the sum of \$140.00.

He was charged with illegal practice of dentistry and appeared before Judge T.R. BeGora on December 9th, 1982. The evidence was submitted and he was found guilty. He was given a suspended sentence with three years probation. He is to keep the peace, be of good behavior and not in any way practice dentistry. Should he breach this probation, he would be brought before the courts and sentenced on the charge.

b. Ottawa, Ontario

Mr. Ladislav Beno, 479 Somerset St. W., Ottawa, Ontario, a denture therapist, made a partial denture for Mrs. G. Theodore without supervision. The source of this complaint was from the Ottawa Dental Society.

He was charged with illegal practice of dentistry and appeared in Ottawa Court on June 15th, 1983. He pleaded guilty and was given a fine of \$100.00.

c. Mississauga, Ontario

Mrs. Maria Subda, 125A Dundas St. E., Mississauga, Ontario, a denture therapist, made a partial denture for Mr. Peter McKelvey without the supervision of a dentist.

She was charged with illegal practice of dentistry and appeared in Cooksville Court on September 9th, 1983. She pleaded guilty to the charge and was given a \$200.00 fine by Judge R. Robbins.

d. Windsor, Ontario

Mr. Milisav Krgovic, 4196 Maryland, Detroit, Michigan, U.S.A. It is alleged that Mr. Krgovic has been coming to Windsor and practicing dentistry including such services as extractions, crown and bridge prosthesis, as well as other branches of dentistry. The Windsor Police Department became aware of this and notified our office.

An investigation has been made and a warrant has been issued for his arrest on a charge of illegal practice of dentistry. The Windsor Police hold the warrant and will notify the College

when he is arrested.

OUTSTANDING APPEALS

a. We have one appeal from a Discipline Hearing pending before the courts.

b. There are seven cases which are pending Judicial Review.

INFORMATION

a. A large increase has been noted in the number of complaints about signs. These complaints relate to the size, the number of signs, the wording and the listing of telephone numbers on the signs.

b. The amount of time required for investigations and inspections has increased over this past year. This is caused partly by additional inspections ordered by the Discipline Committee.

Complaints

REPORT OF THE COMPLAINTS COMMITTEE

Chairman: J.K. Hunter, D.D.S.

Committee Members: W.H. Treleaven, D.D.S.,
J. A. Monteith

Hygienist Observer: J.A. Pearce

THE COMPLAINTS MECHANISM

Before the Complaints Committee of The Royal College of Dental Surgeons of Ontario can consider and investigate concerns or complaints from the public, they must have received a letter from the patient or his/her representative outlining the problem. Ontario Government legislation insists upon this. (Health Disciplines Act, Section 35).

Many letters and phone calls of enquiry or complaint are very adequately handled and resolved by the R.C.D.S. staff thus avoiding referral to the Complaints Committee.

On referral of a complaint to the Complaints Committee the committee may request the patient and/or the dentist to meet with them at the College Headquarters. The meeting is kept on an informal basis with a sincere effort on the part of the Committee to satisfactorily resolve the complaint to the mutual agreement of the parties concerned. After complete examination and consideration of all pertinent materials to the complaint, the Complaints Committee prepares a written decision which is sent to both the complainant and the one against whom the complaint was lodged.

APPEAL MECHANISMS

a. The Health Disciplines Board:

If the complainant or the one complained against is not satisfied with the decision of the Complaints Committee, there is an appeal mechanism available, the Health Disciplines Board. Its purpose is to review any appealed decision of the Complaints Committee of the five colleges covered by the Health Disciplines Act. The review examines the actions of the Complaints Committee to determine if:

- all relevant facts have been considered
- the proposed solution is reasonable
- the public interest has been protected

The board is permitted to take a number of actions:

It may concur with the decision of the Complaints Committee; it may require the Complaints Committee to obtain additional information, reconsider the complaint, render a new (appealed) decision, caution the member, or it may require the Complaints Committee to refer the matter for a hearing before the Discipline Committee of the College. It cannot, however, deal with monetary issues.

b. The Ombudsman:

In 1979 the Court of Appeal of the Supreme Court of Ontario decided that the Ombudsman had the authority to investigate



J.A. Monteith, J.K. Hunter (Chairman), W.H. Treleaven

decisions of the Health Disciplines Board.

Because of this ruling, and in order to forestall criticism by the Ombudsman, the Health Disciplines Board now requires a much more detailed investigation of complaints than it formerly did which necessitates extra work for the College.

In 1983 the Complaints Committee met for 21 full day sessions and 3 evening meetings and handled 160 complaints. Thirty-seven of our decisions were appealed to the Health Disciplines Board.

During the same period, the Health Disciplines Board reviewed 30 decisions and upheld the Committee on 24. One case was withdrawn. Three cases were referred back to the Committee and 2 referrals were made by the Health Disciplines Board to the Discipline Committee.

Total number of complaints received as of December 15, 1983 is 416 compared to 349 in the same period of 1982 – a 5.2 % increase. These complaints are written complaints on which the College must act as stated in the Health Disciplines Act.

AREAS OF CONCERN:

a. Communications

A number of complaints arise from poor communications within the dental office. Insufficient explanation of follow-up care required, inadequate explanation of risks involved in a procedure, failure to explain office policies on payment of fees and cancellation of appointments are some areas of concern.

Practitioners with irregular recall systems have been unable to monitor periodontal deterioration, orthodontic status and endodontic complications and, when patients attend other dentists, they are often informed the previous practitioner has been neglectful thus leading to a complaint.

b. Disputes between Practitioners

This is an ever-growing problem and a problem which the Complaints Committee likes to stay out of unless the patients are being used as "pawns". Lack of documentation as to the original agreement between senior dentist and associate is one of the problems as well as documentation as to agreement of dissolution of association. The Committee recommends that EVERYTHING be clearly documented and be written in legal terms prior to the commencement of any association between dentist and associate.

c. Overtreatment

Many patients in the larger metropolitan areas change their practitioners frequently and as a result often have different and varied diagnosis and treatment plans. New practitioners seem to have a tendency to treat much that has been under observation by the former primary care practitioner. This apparent "22 new cavities situation" creates alarm in the patient's mind and frequently stimulates a complaint and upon investigation overtreatment definitely seems to be the situation. Caution is suggested but full disclosure as well.

d. Lack of Expertise

Too many practitioners are getting in beyond their dental expertise. Be willing to recognize your limitations and refer. Update of previous education could undoubtedly assist in some of the shortcomings in diagnosis, particularly of periodontal problems; update in current therapy regarding endodontics and orthodontics would definitely reduce the number of complaints in these disciplines.

e. Advertising

Complaints regarding the use of media is an ongoing problem. If in doubt call the College and the staff can give you guidance. Read the regulations. Do not break the law because you do not like it.

Advertising complaints take up an excessive amount of the Complaints Committee's time and blatant and intentional contravention of the regulations results in referral to the Discipline Committee.

f. Fees

Excessive fees and charging for services not rendered is a continuous problem. "Shopping the fee guide" is not condoned by the Complaints Committee and while restitution of monies received does not lie with the legislated jurisdiction of the Complaints Committee, resolution of these types of complaints lies high on the goals of this Committee.

g. Recordkeeping

Recordkeeping is much improved over the past few years particularly by those who use the Dentaguide as an aid to record-keeping problems. The failure to list services performed and the preservation of x-rays is however still an ongoing problem.

CONCLUSION:

The Complaints Committee is the major interface between the public and the profession and as such plays an important role. The work of the Committee is made much easier by the fine and dedicated work of the College staff.

A committee is no better than its members and my sincere thanks goes to my dedicated and persevering members.

It has been an honour to serve as Chairman of this Committee despite the long and arduous hours of not only the actual committee meetings but the volumes of reading necessary to be familiar and fair in dealing with the problems.

Discipline

REPORT OF THE DISCIPLINE COMMITTEE

Chairman: J.I.H. Fawcett, D.D.S.,

Committee Members: K.S. Mathers, D.D.S.,
W.R. Hilliard, D.D.S., R.M. Matsui, D.D.S.,
L.V. Taylor, D.D.S., G. Nikiforuk, D.D.S.,
E. Swadron, R. Thomas

Hygienist Observer: L. Mickelson

COMMENTARY

During 1983, the Discipline Committee sat for 23 days to hear allegations of professional misconduct involving 20 members.

A summary of hearings reportable, and not yet reported, follows.

Currently 21 matters have been referred to the Discipline Committee. Of these, 8 are awaiting judicial review and clarification of procedural matters.

Recently, the Divisional Court of Ontario heard an appeal made by a member against a decision of the Discipline Committee and the penalty it assessed.

The Judges of the Court dismissed the member's appeal and confirmed the penalty save and except respecting the charge wherein it was alleged that he did misadvise or instruct his staff to misadvise as to the location of his former associate's office.

Costs were awarded to the College and against the appellant.

The Discipline Committee is concerned about apparent attempts by some disciplined members to alter or even disregard decisions made and penalties imposed by the Committee. There are instances when members have apparently chosen not to comply with the intent of the decision as stated at the conclusion of the hearing.

The College considers this challenge serious and has taken appropriate steps to ensure that the full intent of the decision of the Committee is fulfilled to ensure the proper protection of the interest of the general public.

Another concern to the Committee has been the availability of appropriate upgrading courses for members of the R.C.D.S. whose practices have been deemed to be below standards expected of practitioners in Ontario.

Some refresher courses have been provided through the good offices of the Dean and the Faculty of the School of Dentistry at the University of Manitoba. This program has been successful and has been appreciated by both those who have been required to and those who have requested an opportunity to take such training.

The Committee would like to see an expansion of these opportunities into more facilities. It has felt that there should be additional opportunities for practitioners to benefit from such programs in Ontario thereby supplementing the excellent opportunities that have been provided at the University of Manitoba.

The Committee wishes to record their appreciation to the Dean and members of the Faculty of Dentistry at the University of Toronto for the recently completed program in Oral Diagnosis and Radiology attended by four of our members. The Committee



Seated: L.V. Taylor, J.I.H. Fawcett (Chairman), R.P. Thomas

Standing: K.S.M. Mathers, W.R. Hilliard, E. Swadron, R.M. Matsui, G. Nikiforuk

was pleased to see this program develop.

The Committee wishes also to publicly acknowledge its appreciation to Dean Arthur Schwartz and the Faculty members of the University of Manitoba.

1.

A hearing was held on December 13, 1982 to hear into allegations of professional misconduct on the part of:

Dr. Winsome E. Smith
400 The East Mall
Etobicoke, Ontario

Dr. Smith pleaded 'guilty' to the charge that she had knowingly submitted a false or misleading account or charge to a benefit plan for services rendered for one of her patients.

Two other charges were withdrawn by the College.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That she be reprimanded and the fact of the reprimand recorded on her personal record.
2. That she be fined the amount of \$1,000.00.
3. That her licence to practice dentistry should be suspended for a period of one month to commence January 1, 1983. The entire suspension shall be remitted upon her undertaking to refund the amount of \$298.00 to the insurance company involved.
4. That the proceeding shall be published in the normal course.

2.

A hearing was held on January 10, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Max Marvin Balshin
55 Queen Street East
Toronto, Ontario

Dr. Balshin pleaded 'guilty' to five charges. These alleged:

- a. That he had improperly used his authority to prescribe, sell or dispense a drug or drugs with respect to any or all of 45 patients.
- b. That he had failed to maintain the standards of practice of the profession in that he had not made records as required by the Regulation with respect to any or all of 45 patients.
- c. That he had failed to maintain the records which are required by the Regulation to be kept in respect to any or all of 45 patients.
- d. That he failed to maintain the standards of practice of the profession in that he failed to treat or cause to be treated adequately or at all conditions which allegedly existed and which allegedly caused him to prescribe, sell or dispense a drug or drugs with respect to any or all of 21 patients.
- e. That he failed to maintain the standards of practice of the profession in that he failed to maintain the office in which and the equipment with which he engaged in the practice of dentistry in a sanitary and hygienic condition.

Two additional charges were withdrawn by the College.

Following deliberation, it was the decision of the Discipline Committee that the following penalty be assessed:

1. That Dr. Balshin's licence to practice dentistry be revoked as of this date.
2. That the proceedings shall be published in the normal course.

3.

A hearing was held on January 12th and 13th, 1983 to hear into allegations of professional misconduct on the part of:

Dr. A.A. Feher
1043 Ouellette Ave.
Windsor, Ontario

Dr. Feher pleaded 'not guilty' to the allegation that he had failed to maintain the standards of practice of the profession in respect to his treatment of one of his patients.

After due deliberation, the Discipline Committee found Dr. Feher 'guilty' as charged. Following deliberation and examination of the facts presented by both counsel with respect to penalty and in particular having now been advised that both parties to these proceedings are in agreement as to the penalty that should be imposed, and the manner in which the penalty should be imposed, the decision of the Committee was as follows:

1. That Dr. Feher be reprimanded and the fact that the reprimand be recorded in the register.
2. That Dr. Feher's licence to practice dentistry in Ontario be suspended until such time as he successfully completes at his own expense:
 - a. a re-training programme satisfactory to the Royal College of Dental Surgeons and offered by the University of Manitoba, Faculty of Dentistry;
 - b. the National Dental Examining Board Canada Part 3 (clinical) Examination.
3. That the suspension take effect on February 15, 1983.
4. That there is to be publication of this procedure in the usual course.

4.

A hearing was held on March 22nd and April 28th, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Dennis Corbasson
222 Lansdowne Avenue
Toronto, Ontario

Dr. Corbasson pleaded 'guilty' to four charges as amended. These alleged:

1. That he had failed to make records as required by the Regulation with respect to any or all of 24 patients.
2. That he had failed to maintain records as required by the Regulation with respect to any or all of 24 patients.
3. That he had failed to maintain the standards of practice of the profession in that he had performed unnecessary dental treatment upon any or all of 16 patients.
4. That he had charged fees that were excessive or unreasonable in relation to services performed with respect to any or all of 17 patients.

One other charge was withdrawn by the College.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry be suspended for a period of six months;

Four months of the suspension shall be remitted subject to his fulfilling the following conditions:

- a. That he successfully complete an upgrading participation programme in endodontics and crown and bridge treatment, such courses to be completed within one year of this date.
- b. That he voluntarily submit to four inspections of his practice by a representative or representatives of the College during the two year period from this date and that his practice at all times shall meet acceptable standards as set out in the Health Disciplines Act.

A further two months of the suspension shall be remitted having given consideration to the special nature and extent of his personal and financial situation.

3. There shall be publication of this proceeding in the normal course.

5.

A hearing was held on March 30, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Howard E. Ironstone
170 Spruce Avenue
Elliott Lake, Ontario

Dr. Ironstone pleaded 'guilty' to eight charges. These charges were:

- a. That he failed to maintain any or adequate clinical records with respect to one or more of five patients.
- b. That he failed to take adequate x-rays with respect to treatment performed for one or more of two patients.
- c. That he failed to take any or adequate x-rays with respect to endodontic treatment performed for one patient.
- d. That he submitted claims to Mutual of Omaha with respect to one or more of three patients wherein he charged fees that were excessive and/or unreasonable in relation to services performed.
- e. That he submitted a claim to Ontario Blue Cross with respect

- to a patient wherein he charged fees that were excessive and/or unreasonable in relation to services performed.
- f. That he failed to take and/or maintain any or an adequate treatment record with respect to the administration of general anaesthesia relative to one or more of three patients.
 - g. That he failed to take and/or maintain any or an adequate treatment record with respect to the administration of intravenous sedation relative to one or more of two patients.
 - h. That he failed to have his office equipped with emergency equipment and in particular a defibrillator at a time when he permitted one or more of three patients to undergo general anaesthesia.

Eleven other charges were withdrawn by the College.

Following deliberation, it was the decision of the Discipline Committee that the following penalty be assessed:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That he be fined in the amount of \$1,000.00.
3. That his licence to practice dentistry should be suspended for a period of three months to commence on May 15, 1983. The first month of the suspension shall be served and the balance to be held in abeyance and remitted conditional upon the following:
 - a. That he successfully complete an upgrading participation programme in endodontics.
 - b. That he agree to an inspection or inspections of his office practice at some time or times during a period of twelve months from the date of his commencing practice after his reinstatement and his practice, in all aspects, shall meet the acceptable standards of practice set out in the Health Disciplines Act.
4. That there shall be publication in the normal course.

6.

A hearing was held on March 30, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Rene Purzner
170 Spruce Avenue
Elliott Lake, Ontario

Dr. Purzner pleaded 'guilty' to seven charges. These charges were:

- a. That he failed to maintain any or adequate clinical records with respect to one or more of three patients.
- b. That he failed to maintain the standards of practice of the profession in respect to endodontic treatment performed for one patient.
- c. That he submitted a claim to Mutual of Omaha with respect to one or more of two patients wherein fees were charged that were excessive and/or unreasonable.
- d. That he submitted a claim to Ontario Blue Cross with respect to a patient wherein he charged fees that were excessive and/or unreasonable.
- e. That he failed to take and/or maintain an adequate treatment record with respect to the administration of general anaesthesia to one or more of two patients.
- f. That he failed to take and/or maintain any or an adequate treatment record with respect to the administration of intravenous sedation relative to one patient.
- g. That he failed to have his office equipped with emergency

equipment and in particular a defibrillator at a time when he permitted one or more of two patients to undergo general anaesthesia.

Following deliberation, it was the decision of the Discipline Committee:

1. That Dr. Purzner be reprimanded and the fact of the reprimand be recorded in the register.
2. That he be fined in the amount of \$1,000.00.
3. That his licence to practice dentistry be suspended for a period of three months to commence May 15, 1983. The first month of the suspension to be served and the balance to be held in abeyance and remitted conditional upon the following:
 - a. That he successfully complete an upgrading participation programme in endodontics.
 - b. That he agree to an inspection or inspections of his office practice at some time or times during a period of twelve months from the date of his commencing practice after his reinstatement and that his practice, in all aspects, shall meet the acceptable standards of practice set out in the Health Disciplines Act.
4. That there shall be publication in the normal course.

7.

A hearing was held on April 19, 1983 to hear into allegations of professional misconduct on the part of a member.

Of the 49 allegations forming part of the Notice of Charge, 2 were withdrawn by the College.

Dr. _____ pleaded 'guilty' and was found 'guilty' to 27 charges. These pertain to 23 charges alleging failure to maintain any or adequate clinical records and 4 charges alleging failure to treat or cause to be treated adequately or at all conditions requiring treatment.

A 'not guilty' plea was entered and the member was found 'guilty' respecting 20 charges.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry shall be suspended for a period of three months.

The entire period of suspension shall be remitted conditional upon the following:

- a. That he voluntarily submit to a re-examination of his practice by a representative or representatives of this College at some time or times within a year from the date of the hearing and that his practice in all respects shall meet the acceptable standards of practice as set out in the Health Disciplines Act 1974. In the event that it is found that his practice does not meet such standards, the three months suspension shall then take effect upon the Discipline Committee having reviewed the facts of the matter.
3. There shall be publication of this proceeding with the name and address of the member deleted.

8.

A hearing was held on April 20, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Alan J. Clarke
200 St. Clair Avenue West, Toronto, Ontario

Of the 8 allegations forming part of the Notice of Charge, 2 were withdrawn by the College.

Dr. Clarke pleaded 'guilty' and was found 'guilty' with respect to 6 charges involving some 32 patients. The charges alleged:

1. The failure to maintain any or adequate clinical records re 32 patients.
2. The failure to take any or adequate medical histories re 30 patients.
3. The failure to treat or cause to be treated adequately or at all 20 patients.
4. The failure to diagnose and/or treat, adequately or at all 2 patients.
5. The failure to take any or adequate x-rays preliminary to treatment performed re 8 patients.
6. The failure to take any or adequate x-rays with respect to treatment performed re 9 patients.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry shall be suspended for a period of 12 months, commencing April 25, 1983.
 - a. Two months of such suspension shall be remitted having given consideration to the special circumstances of his personal and financial situation.
 - b. A further 4 months of the suspension shall be remitted conditional upon the following:
 - i. That he fulfill the requirements of his undertaking to successfully complete a course or courses at the University of Manitoba.
 - ii. That he voluntarily submit to further counselling with a counsellor of his choice until such time as it is determined that further treatment is no longer required.
 - iii. Dr. Clarke shall provide the College, at his own expense, written reports from the counsellor providing such treatment at 3 month intervals, commencing July 1, 1983.
 - c. A further 4 months of the suspension shall be remitted conditional upon the following:
 - i. That he voluntarily submit to inspection or inspections of his practice by a representative or representatives of this College at such time or times during a period of 12 months from the date of his reinstatement and that his practice shall meet the acceptable standards of practice as set out in the Health Disciplines Act 1974.
 - ii. That he fulfill the intent of the undertaking.

In the event that any or all of these conditions are not met, the balance of the applicable period of suspension shall come into effect immediately.

3. There shall be publication of the proceeding in the normal course.

9.

A hearing was held on June 7, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Barry Berman
14 Madison Avenue
Toronto, Ontario

Dr. Berman pleaded 'guilty' and was found 'guilty' with respect to 3 allegations contained in the Notice of Charge.

These charges allege that:

1. He did permit, counsel, and assist one Mrs. Berman, his wife, a person not licenced under Part 2 of the Act, to engage in the practice of dentistry contrary to the applicable provision of the Act.
2. That he failed to abide by the terms, conditions or limitations of his licence in respect to his treatment of one or more of his patients, and in particular had sold a drug, medical product or biological preparation at a profit in circumstances where the drug, medical product or biological preparation was not necessary since it was not for immediate treatment of the patient or in an emergency where the services of a pharmacist were not reasonably available to one or more of his patients.
3. He gave information concerning the professional services performed to 2 of his patients to a person other than those patients without their consent or without being required to do so by law.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry shall be suspended for a period of 2 months, such suspension start October 1, 1983.
3. That he voluntarily submit to inspection or inspections of his practice by a representative or representatives of this College at some time or times during a period of twelve months from this date and that his practice at all times meet the acceptable standards of practice as set out in the Health Disciplines Act.
4. That he be fined \$2,000.00 which amount shall be paid by him to the Treasurer of Ontario for payment into the Consolidated Revenue Fund.
5. That there shall be publication of this proceeding in the normal course.

10.

A hearing was held on June 22, 1983 to hear into allegations of professional misconduct on the part of a member.

Dr. _____ pleaded 'guilty' to 5 charges and was found 'guilty' with respect to 4 allegations contained in the Notice of Charge.

The charges to which he was found 'guilty' alleged that:

1. He failed to maintain adequate clinical records with respect to one or more of 12 patients.
2. He failed to take any or an adequate medical history preliminary to treatment performed with respect to one or more of 12 patients.
3. He charged fees that were excessive or unreasonable in relation to services allegedly performed re one or more of 12 patients.
4. He submitted claims for services rendered or charged fees for services which services were not performed in respect to one or more of 3 patients.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and that the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry in Ontario shall be

suspended for a period of 2 months, such suspension to commence December 1, 1983.

The entire period of suspension shall be remitted conditional upon the following:

- a. That he successfully complete an upgrading course with emphasis on dental record keeping, medical history taking and billing practices offered by the University of Manitoba at his own expense.
- b. That he agree to an inspection or inspections of his office practice at some time or times during the period of 12 months from the date of completion of the University of Manitoba course and that his practice in all aspects shall meet the standards of practice as set out in the Health Disciplines Act 1980.

3. That this proceeding shall be published with the name and address of the member deleted.

11.

A hearing was held on July 4, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Stephen C. Ho
192 Dupont Street
Toronto, Ontario

Of the 7 allegations forming part of the Notice of Charge, 3 were withdrawn by the College.

Dr. Ho pleaded 'guilty' and was found 'guilty' with respect to 4 allegations contained in the Notice of Charge.

The charges alleged that:

1. He failed to maintain any or adequate clinical records respecting one or more of 27 patients.
2. He failed to take any or an adequate medical history preliminary to treatment performed and/or failed to update same adequately or at all re one or more of 27 patients.
3. He charged fees that were excessive or unreasonable in respect of services performed on one or more of 26 patients.
4. He submitted a claim or claims to Green Shield Prepaid Services Incorporated in respect to services rendered to one or more of 26 patients in which claim(s) he represented the fee for services rendered as being greater than the fee actually charged.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry be suspended for a period of 4 months.
 - a. One month of such suspension shall be remitted conditional upon his successfully completing an upgrading course in dental record keeping, medical history taking, financial record keeping and billing practices designed and provided by a clinical instructor at the Faculty of Dentistry, University of Toronto and approved by the Registrar of this College and to be completed by September 30, 1983.
 - b. One additional month shall be remitted conditional upon his voluntarily agreeing to an inspection or inspections of his office practice at some or times during a period of 12 months from this date and that his practice shall meet the acceptable standards of practice as set out in the Health Disciplines Act, 1980.

- c. Two additional months shall be remitted having given consideration to the special circumstances of his practice and the contribution that he has made over the years to the unusual and particular needs of some of his patients at a reduced fee or in those instances where no fee was received by him.

3. That there shall be publication of this proceeding in the normal course.

12.

A hearing was held on July 14, 1983 to hear into allegations of professional misconduct on the part of a member.

Dr. _____ pleaded 'not guilty' and was found 'not guilty' to the 2 charges as read.

13.

A hearing was held on July 25, 1983 to hear into allegations of professional misconduct on the part of a member.

Of the 9 allegations forming part of the Notice of Charge, 7 were withdrawn by the College.

Dr. _____ pleaded 'guilty' and was found 'guilty' with respect to 2 allegations (1 as amended) contained in the Notice of Charge.

The charges alleged that:

1. He failed to maintain any or adequate clinical records respecting one or more of 27 patients.
2. That he failed to diagnose and/or treat or cause to be treated adequately or at all, lesions requiring treatment for one or more of 16 patients over periods varying from one to 7 years.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry shall be suspended for a period of 3 months.

The entire period of suspension shall be remitted conditional upon the following:

- a. That he complete an upgrading program in record keeping and treatment planning, such program to be conducted through the Faculty of Dentistry at the University of Toronto. This program shall be structured to the satisfaction of the Registrar and be completed within 4 months of this date and shall be at the expense of the member.
- b. That he voluntarily agree to a review or reviews of his office practice at some time or times during a period of 12 months following completion of the upgrading program and that his practice shall meet the acceptable standards of practice as set out in the Health Disciplines Act, 1980.
3. This proceeding shall be published with the name and address of the member deleted.

14.

A hearing was held on August 12, 1983 to hear into allegations of professional misconduct on the part of a member.

Of the 19 allegations forming part of the Notice of Charge, 6 were withdrawn by the College.

Dr. _____ pleaded 'guilty' and was found 'guilty' to 13 charges.

There were 6 charges alleging that he failed to maintain any or

adequate clinical records. There were 6 charges alleging that he failed to treat or cause to be treated adequately or at all conditions that existed. There was 1 charge that he did permit, counsel or assist a person not licenced under Part 2 of the Act to engage in the practice of dentistry.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. That his licence to practice dentistry be suspended for a period of 6 months.
 - a. Two months of such suspension shall be remitted conditional upon his successfully completing an upgrading course in dental record keeping, medical history taking, diagnosis and treatment planning, such course to be constructed and approved by the Registrar of this College and shall be completed by December 31, 1983. The cost of such upgrading course shall be at the expense of the member.
 - b. A further 2 months of such suspension shall be remitted conditional upon his voluntarily agreeing to an inspection or inspections of his office practice at some time or times during the period of 12 months from the date of his reinstatement and that his practice shall meet the acceptable standards of practice as set out in the Health Disciplines Act, 1980.
 - c. His licence to practice dentistry shall be suspended effective October 31, 1983 to December 30, 1983 inclusive.
3. This proceeding shall be published with the name and address of the member deleted.

15.
A hearing was held on August 17, 1983 to hear into allegations of professional misconduct on the part of a member.

The Discipline Committee agreed with the request of the solicitor for the Royal College of Dental Surgeons of Ontario that the allegations that formed part of the Notice of Charge be withdrawn.

16.
A hearing was held on September 20, 1983 to hear into allegations of professional misconduct on the part of a member.

Dr. _____ pleaded 'guilty' and was found 'guilty' to 3 charges. All 3 charges pertained to the placing of an advertisement related to the practice of dentistry that appeared on more than 3 occasions.

Following deliberation and examination of the facts presented by both counsel, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded in the register.
2. The proceedings shall be published with the name and address of the member deleted.

17.
A hearing was held on May 9, 1983 to hear into allegations of professional misconduct on the parts of 3 members.

No plea was entered by the defendants. The College submitted no evidence.

Following deliberation and consideration of the information presented by the solicitor for the College, the Committee dismissed the charges against the 3 members

18.
A hearing was held on October 11, 12, and 25, 1983 to hear into allegations of professional misconduct on the part of:

Dr. Sophie Wichert
2251 Dundas Street West
Toronto, Ontario

Of the 30 allegations forming part of the Notice of Charge, 7 were withdrawn by the College.

Dr. Wichert pleaded 'not guilty' to the balance.

After due deliberation, the Discipline Committee found Dr. Wichert 'guilty' of 17 of the 23 charges.

These charges included:

1. Three charges alleging that she failed to maintain any or adequate clinical records respecting some of her patients.
2. Two charges that she failed to take any or adequate medical histories respecting some of her patients.
3. Five charges alleging that she failed to take any or adequate x-rays preliminary to treatment performed for several of her patients.
4. Four charges that she charged fees that were excessive or unreasonable in relation to the services performed respecting some of her patients.
5. Two charges that she failed to diagnose and/or treat adequately or at all conditions existing relative to some of her patients.
6. A charge that she failed to maintain the standards of practice of the profession in the lack of recorded follow up to treatment rendered to one of her patients.

Following deliberation, it was the decision of the Discipline Committee that the following penalty be assessed.

1. That she be reprimanded and the fact of the reprimand be recorded in the register.
2. That she be fined \$1,000.00.
3. That her licence to practice dentistry be suspended for a period of 9 months, such suspension to commence November 15, 1983. Six months of such suspension to be remitted conditional upon the following:
 - a. That she successfully complete an upgrading course with emphasis on dental record keeping, medical history taking and billing practices offered by the University of Manitoba at her own expenses. This course to be completed within six months of this date.
 - b. That she agree to an inspection or inspections of her office practice at some time or times during a period of twelve months from the date of her commencing practice after her reinstatement and that her practice in all aspects shall meet the acceptable standards of practice as set out in the Health Disciplines Act.

In the event that either or both of these conditions are not met, then the balance of the suspension shall take effect.

4. That there shall be publication of the proceeding in the normal course.

19.
A hearing was held on June 22 and 23, 1982 to hear into allegations of professional misconduct on the part of:

Dr. Jay Bacher
2568 Eglinton Ave. West
Toronto, Ontario

Of the 4 allegations forming part of the Notice of Charge, 1 was withdrawn by the College.

Dr. Bacher pleaded not 'guilty' and was found 'guilty' with respect to 2 or 3 remaining charges.

Following deliberation, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded.
2. That the proceeding be published in the normal course.

Dr. Bacher appealed both the decision and the penalty.

The Divisional Court confirmed the finding of guilt on the matter that he had distributed an announcement card to his patients that contained information other than that permitted by the Regulations.

The Court also confirmed the penalty and awarded costs to the College.

20.

A hearing was held on April 7, 1983 to consider allegations of professional misconduct against:

Dr. Herman K. Kupeyan
1083/1085 Ouellette Avenue
Windsor, Ontario

Dr. Kupeyan pleaded 'guilty' to allegations that:

1. His conduct was unprofessional in that he failed to implement proper and adequate administrative controls and procedures in that
 - a. he delegated the responsibility to members of his staff for preparing and rendering accounts and insurance claim forms for services rendered.
 - b. he failed to adequately instruct and supervise members of his staff in respect of the preparing and rendering of accounts and insurance claim forms.
 - c. he signed insurance claim forms in blank prior to treating his patients which were then completed and submitted by members of his staff without his prior review and approval.
 - d. his staff completed and submitted insurance claim forms for some of his patients, which contained errors in coding and describing the services rendered, whereby certain simple extractions were coded in error as complicated, in the date the services were rendered and in the fee charged in respect thereto.

Note: These charges relate to conduct in 1977-78.

Following deliberation the Discipline Committee assessed the following penalty:

1. That he be reprimanded and that the fact of the reprimand be recorded in the Register.
2. That his certificate of licence to practice be suspended for a period of two months, effective immediately.
3. That there shall be publication of his name in the annual *Proceedings* of the College.

Other Reports

REPORT OF THE LIEUTENANT GOVERNOR IN COUNCIL REPRESENTATIVES TO THE R.C.D.S.

Mr. J.A. Monteith, Rev. R. Thomas,
Mrs. E. Swadron

The three lay representatives to the Council have been meeting on a regular basis during the past year to exchange views on the matters being considered by Council. Being lay persons it is only natural that our views may differ in certain respects from those of the dental representatives. We must emphasize that we are pleased by the manner in which the dental members of Council as well as the staff of the College accept our input.

R.C.D.S. - O.D.A. RELATIONSHIP

At present our chief area of concern is the relationship that exists between some members of Council and the Ontario Dental Association. In our view the voluntary organization exerts or appears to exert undue influence on members of Council. This was particularly apparent to us recently when the issue of the supervision of hygienists was being considered. In order to assume that the best interest of the public is being served it is very important for the two organizations to maintain independence from one another. We say this because the two organizations have different priorities on some issues.

SUPERVISION OF DENTAL HYGIENISTS

We feel that rigidly attempting to maintain the "status quo" with regards to the interpretation of the meaning of supervision will result in further fragmentation of the dental team. We note the double standard that presently exists between what is permitted in public health and that permitted in the private practice setting.

In our opinion the extending of dental care to persons in institutions who presently do not have it cannot be accomplished successfully without a modified approach to the supervision of dental hygienists.

COUNCIL-STAFF RELATIONS

We are concerned with the manner in which the relationship between the Council and the senior staff has deteriorated during this past year. We feel that the staff has been doing a good job. On occasion they focus Council's attention on the R.C.D.S. objective of the protection of the public as they properly should. Certain members of College and the Council appear to resent this.

Another problem we see is the extensive volume of paper which is being generated under the present system such as the production of draft minutes of Council and Committee meetings.

ACCOMMODATION

On the positive side we are gratified that at least another look is



J.A. Monteith, E. Swadron, R.P. Thomas

being taken into accommodations other than attempts to modify the existing headquarters. We acknowledge that no public funds are being expended in this regard, however, we do *not* feel that the public can be effectively served by expanding the present location. Considering the parking and the logistics of operating the College business from four floors, in a building not originally designed for this type of use, can only magnify the problems presently being encountered.

QUALITY ASSURANCE

Some form of quality assurance is in our opinion inevitable. This we understand may have been confirmed by information which has been received recently by the Ontario Dental Association. Our distinct preference is a form that embodies the peer assessment principle. However, regardless of the form by which quality assurance develops, we feel it should be evolved within the profession. We feel that government intervention will be one of the consequences if the Council does not act expeditiously on this matter.

CAPITATION

We would like to be on record emphatically that we consider the delivery of dental services by the mode of capitation not to be in the best interest of the public or the profession. In our opinion statistical information indicates clearly, that the nature of dental care provided under capitation programs may not encourage the dentist to maintain the dentition by utilizing the more advanced means available under the present state of the art. It appears obvious to us that, when a third party other than the dentist and the patient becomes involved, firstly the funds available for treatment must be reduced and secondly the freedom of the individual to select his own dentist is jeopardized.

CONCLUSION

We reiterate that in general the dental members of Council and the dental hygiene official observers have been willing to con-

sider our viewpoint. Recently we have established a liaison with Gina Brannan the policy advisor to the Minister of Health.

We emphasize that even the frankest type of discussion should not result in ongoing antagonisms between members of

Council be they lay or dental representatives. Each matter for discussion ought to be dealt with on its individual merit. Accordingly the lay members of Council do not vote as a unit nor should any group of dentists on Council do so.

REPORT OF THE DENTAL HYGIENIST OBSERVERS

Mrs. Lynda Mickelson, Mrs. Jocelyn Pearce

Ontario has always been progressive in the field of dentistry. Thirty-three years ago Ontario recognized the value of educating a skilled dental auxiliary who could, in collaboration with a duly qualified and licensed dentist:

1. extend quality preventive services to both the private and public sectors
2. provide preventive dental treatment
3. promote individual responsibility for dental health.

In 1953, the Royal College of Dental Surgeons of Ontario licensed the first dental hygienists in Canada. In 1981 the first election was held to elect two dental hygiene official observers, one to represent Toronto and the district of York and one to

represent the rest of the province. Many hygienists worked hard to gain these two elected positions. Now hygienists are actively involved in the decisions affecting their profession.

We serve on all committees, however, we do not vote on Council or on statutory committees – Executive, Registration, Complaints and Discipline. Therefore the next few years are particularly important in the history of dental hygiene. With the revision of the Health Disciplines Act we expect the elected hygienists to become full voting members on all statutory committees. Hygienists will gain further recognition with voting privileges on Council.

REPORT OF THE ANAESTHESIA AND SEDATION COMMITTEE

Chairman: G.E. Pitkin, D.D.S.

Committee Members: G. Beber, D.D.S.,
H. Dexter, D.D.S., V. Drenfeld, D.D.S.,
R. Locke, D.D.S., R.M. Matsui, D.D.S.,
I. Schofield, D.D.S., L.V. Taylor, D.D.S.

The Anaesthesia and Sedation Committee underwent a slight restructuring this year in that its composition has been delineated as having one member from each interested specialty group plus two additional members of the R.C.D.S. Council. The groups represented on this committee include the Ontario Dental Society of Anaesthesiology, the Conscious Sedation Study Club, the Ontario Society of Oral and Maxillofacial Surgeons, the University of Toronto Anaesthesia Department and the University of Western Ontario Anaesthesia Department.

Our committee continues in its efforts to fully examine anaesthesia and sedation techniques practised within the province in order to ensure practitioners' competence and public protection.

Three major tasks have kept the Committee busy this year and we are pleased to report that two of them have reached a conclusion at this point and the third is well along.

First of all, the Committee wrestled long and hard with the issue of length of time for in-office general anaesthesia procedures. There was and still is concern that some general

anaesthetics were being administered for very long in-office procedures. However, the Committee feels that it would be unwise and frankly impractical to arbitrarily impose definite time limits on this practice technique at this time. It is felt that the practitioner's own professional judgment and prudence must be the deciding factor in these circumstances. However, the Committee will continue to monitor this concern in the future.

The second task completed by The Anaesthesia and Sedation Committee this year was to completely review and revise the College's Guidelines for the Utilization of Nitrous Oxide-Oxygen Conscious Sedation, Intravenous Conscious Sedation, and General Anaesthesia Techniques. These revised guidelines will have been distributed to you by the time you read this report and it is mandatory that you make yourself very familiar with their intent and application if you are to utilize any of these modalities in your practice. We hope you find them responsible and useful.

At the present time, the Committee is engaged in up-dating its records concerning those practitioners who utilize anaesthesia techniques in Ontario, with special reference to those employing

general anaesthesia and intravenous sedation. A questionnaire will have been circulated to everyone in the province and we hope to be able to review all of these during the coming year in

order to make recommendations and helpful suggestions to those practitioners involved in providing these services. We will report on our activities as the next year progresses.

REPORT OF THE AD HOC COMMITTEE ON SUPERVISION OF DENTAL HYGIENISTS

Chairman: K.S.M. Mathers, D.D.S.

Committee Members: J.I.H. Fawcett, D.D.S.,
J.K. Hunter, D.D.S., G. Nikiforuk, D.D.S.,
L.V. Taylor, D.D.S., J.A. Monteith,
L. Mickelson, J.A. Pearce

This Committee met on five occasions in 1983. The meetings were held on February 24th, April 6th, June 21st, July 21st and October 13th.

Representatives of the O.D.A. and the O.D.H.A. attended the July 21st meeting. At all of these meetings, the Committee attempted to clarify the interpretation of the term "supervision".

In an article I wrote for the September issue of the Ontario Dentist, I expressed the concerns of many members of the public as well as the members of the Committee, that not even basic dental care was being provided to many residents of "Collective Living Centres" in Ontario.

Unfortunately, some members of the profession have misunderstood the intent of this Committee. They have viewed our

attempts to give consideration to a broader interpretation of the word "supervision" as the first step towards establishing independent practice for dental hygienists. I assure you, no one on the Committee is in favour of such a step.

The Committee did not bring forward any recommendation to the Council meeting in November. However, a motion was passed by Council members to rename the Committee "The Ad Hoc Committee on Delivery of Dental Care to Patients in Institutions, Public Health and Collective Living Centres".

This Committee will continue to study such matters as the O.D.A. Geriatric Program and the regulation of duties of dental hygienists for all practice settings.

REPORT OF THE AD HOC QUALITY ASSURANCE COMMITTEE

Chairman: W.H. Treleaven, D.D.S.

Committee Members: G. Nikiforuk, D.D.S.,
R.M. Matsui, D.D.S., K.S.M. Mathers, D.D.S.,
J.I.H. Fawcett, D.D.S., R. Thomas

This committee met three times during the year. The name of the committee was changed by Council from Peer Assessment to Quality Assurance in order to provide a broader base in which to work.

We have held hearings with the societies and specialty groups who submitted briefs. We have studied the Quality Assurance program of the American Dental Association and the forms followed by other provinces of Canada. They range from continuing education to peer review. Peer review was legislated by government in one of the provinces. The Practice Enrichment Program (P.E.P.) of the O.D.A. has also been reviewed.

We understand from reports of the O.D.A. political caucus dinners that both the Liberal and Conservative parties were very

interested in a quality assurance program. Medicine already has it, and have requested it to be included in the Health Disciplines Act.

When the committee feels they have prepared a working paper, it will be presented to the members through their societies for input and constructive criticism.

I feel we have only so much time to resolve this problem or the government may do it for us, on their terms.

REPORT OF THE AD HOC COMMITTEE ON MANPOWER

Chairman: G.E. Pitkin, D.D.S.

Committee Members: J.K. Hunter, D.D.S.,
K.S. M. Mathers, D.D.S., E. Swadron
J.A. Pearce

The Ad Hoc Committee on Manpower was formed to study the increasing problems of perceived oversupply of dental personnel and underutilization of dental services in the province of Ontario. One of our major resource documents for our concerns has been the Lewis Report, "Research into Dental Manpower in Ontario".

Our committee has attempted to affect change in our perception of the problem by governmental liaison and lobbying and by examining initially the number of graduating dentists and hygienists in Ontario.

We asked the Minister of Health to officially endorse this report as a means of establishing its credibility. However, they seem to treat it more as just a historic document of some interest with recommendations. The Committee, although not surprised by this attitude, were disappointed with the government's apparent non-committal approach.

As you are no doubt aware, the University of Toronto has reduced its first year enrolment to 104 students from 120. This is encouraging and the Committee hopes this trend will continue once the current expansion program is completed. However, we were disappointed that the University of Western Ontario did not reduce their figure as we had hoped. There are some indications that this may be re-examined in 1984.

A survey of dental hygienists employment status was completed and examined by the Committee this year and surprisingly it indicated that there is little, if any, oversupply in this

segment of the dental profession at this time. The committee, however, feels that this survey will likely provide an interesting data baseline for future surveys and we further feel that this lack of concern may be only short-lived. As a result, these surveys will be continued.

Future projects being undertaken by this committee include the drafting of a guideline for "Career Night" speakers telling the truth about dental employment opportunities. This will not be done to discourage enrolment as we firmly believe in and espouse the continuing need for good practitioners and students but it will better inform the prospective dental students about the changing scene in dentistry when selecting it as a career. The committee also presented to Council its concerns regarding the National Dental Examining Board's examination and certificate. We feel that only the very best dental practitioner should practise in Ontario and that our public not only demands but deserves this. As a result of Council's decision, the R.S.D.S. will be examining the possibility of devising and implementing a further provincial examination to go along with the N.D.E.B. requirement for someone outside the province of Ontario to practise here.

The Chairman also hopes to address the subject of underutilization of our dental services in the near future as well and I hope to report on these activities also next year.

REPORT OF THE AD HOC COMMITTEE ON DENTAL IMPLANTS

Chairman: G.E. Pitkin, D.D.S.

Committee Members: J. Cox, D.D.S.,
J. Druck, D.D.S., L. Pedlar, D.D.S., P. Watson, D.D.S.

This is a new ad hoc committee of the Royal College of Dental Surgeons of Ontario and its membership is composed of both academic and practical experts in the field of implantology.

The College has become concerned with the question of the profession's training requirements, the practical application of this treatment modality and the public's perception and safety with regards to the utilization of this rather new art and science. The committee is examining the current status and types of implants and their application and success records. We are also interested in the public's perception and expectations of this form of treatment.

Most importantly, this Committee will be devoting itself earnestly to the formulation of professionally acceptable criteria and guidelines for training requirements we feel are minimally required to enable a practitioner to utilize this technique in his practice.

It is felt that at present time, implantology is more an "art" than a "science", but it is hoped that through scientific and practical studies now going on more longitudinal study data will rectify this concern. We hope to have our recommendations ready for Council approval sometime in 1984.

DENTISTRY REVIEW COMMITTEE

Chairman: N.L. Diefenbacher, D.D.S.

Committee Members: J. Becker, D.D.S.,
C. Young, T.J. Jasper, D.D.S., W.E. Allen

When presenting reports, most chairmen like to describe how active their committee has been. Such is not the situation when you are Chairman of the Dentistry Review Committee. The Committee only functions when the General Manager of O.H.I.P. refers a matter to it regarding a billing irregularity by a dentist. In 1983, there has been no referrals, consequently the Committee has not met. However, there is one appeal from a decision of the Committee in 1982 to the Health Services Appeal Board that is outstanding.

The Chairman feels as lonely as the Maytag repairman. Seriously, I believe it is a compliment to our profession that there appears to be little or no irregularities or misunderstandings in

the billing practices of dentists as they relate to O.H.I.P.

All members of the Committee are appointed by Lieutenant-Governor-in-Council and my term will expire early in 1984. It has been an honour to have been asked to serve on this Committee and I am grateful for the assistance I have received from the members of the Committee over the years.

Treasurer

REPORT OF THE TREASURER

Kenneth F. Pownall, D.D.S.



FINANCIAL STATEMENTS

Attached to this report are the following:

- Appendix A – the Auditors' Report
- Appendix B – the Balance Sheet as at December 31, 1982
- Appendix C – the Statement – the General Fund
- Appendix D – the Statement – the Professional Liability Insurance Fund
- Appendix E – the Statement – the Centennial Fund
- Appendix F – the Statement – the Harry R. Abbott Memorial Library Fund
- Appendix G – the Notes to the Financial Statement

BALANCE SHEET

The Balance Sheet confirms that the College's finances are sound. The amount shown as "Cash" may appear at first glance to be an unusually high amount of money to have in the bank. Due to a special arrangement the College has negotiated with the Royal Bank of Canada this money is earning the term deposit 30–59 day interest rate on the College's minimum monthly balance plus the bank prime rate minus 3.5% on our average monthly balance.

This arrangement provides the College with an acceptable rate of interest and minimizes cash flow problems or possible interest penalties for the redemption of term deposits before they are due.

STATEMENTS OF REVENUE AND EXPENSES AND SURPLUS

a. The General Fund

Revenue

The main source of revenue for the College is derived from the annual licence fee of dentists and dental hygienists. Note that approximately one-third of the money derived from the licence fees paid by dentists is transferred to the Professional Liability Insurance Fund.

The item "examination fees" refers to dental hygiene examinations. Every hygienist being licenced in Ontario for the first time is required to successfully complete an examination.

Sound money management, coupled with high interest rates, resulted in the College receiving nearly a quarter-of-a-million dollars in interest in 1982.

Property rent is the revenue from a small apartment occupied by our caretaker. Sundry revenue is derived mainly from the sale of our list of members to dental-related companies. Continuing Education charges are for the lecture courses presented around the province.

Expenses

The increase in expenses in 1982 over 1981 is mainly due to the usual increases associated with an inflationary economy and increased activities. The cost of stamps escalated markedly in 1982 with the advent of Canada Post. Property expenses in-

cluded the usual expenses, but in 1982 renovations to increase utilizable office space on the second floor were required. "Honoraria" is the stipend paid to Members of Council; "Council and Committee" refers to food and accommodation expenses for Members of Council while serving the College. Professional fees include both legal and auditing fees. The radiation safety survey was a very successful project and is a non-recurring expense.

Surplus

While the amount of our excess of revenue over expenses decreased in 1982 compared to 1981, it is pleasant in these days of economic uncertainty to report any excess. Continuing good news in the years ahead involving excess income is questionable. The ever increasing demands on the College will reflect in the need for increasing staff and increasing accommodation.

b. The Professional Liability Insurance Program

Details on the plan are covered in the Report of the Professional Liability Insurance Committee.

c. The Centennial Fund

This Fund was established in 1968 to commemorate the Centennial of the RCDS. The original purpose of the Fund was to establish and up-date from time to time the exhibit on dentistry at the Ontario Science Centre. The Fund has not been used for several years.

d. The Harry R. Abbott Memorial Library Fund

The Will of the late Mrs. Dorind Tully which was probated in 1924 established a trust fund. The fund is a memorial to her brother, Dr. H.R. Abbott, who was President of the RCDS from 1903 to 1907. The terms of the Will directs that the interest from the Fund be paid annually to the RCDS for the purchase of books for the RCDS Library. The RCDS Library became the Library of the Faculty of Dentistry, University of Toronto, in 1925. Since it is costly to attempt to change the wording of the Will the money made from the investments is paid to the RCDS and the College forwards the money to the Faculty of Dentistry of the University of Toronto.

RE-APPOINTMENT OF AUDITORS

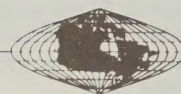
The Firm of Thorne Riddell continues to provide very efficient and capable auditing services as it has for many years. It was recommended that they be re-appointed as our auditors for the year 1983 and this recommendation was adopted by the Council.

APPRECIATION

Presenting this Report provides me with the opportunity to bring to the attention of the members of the College a fact of which I believe many of you are well aware. This College is fortunate to have a staff of loyal and devoted people. I appreciate the assistance they provide in the administration of the RCDS.

**THORNE
RIDDELL**

Chartered Accountants

**AUDITORS' REPORT**

To the Members of the Council of
The Royal College of Dental Surgeons of Ontario

We have examined the balance sheet of The Royal College of Dental Surgeons of Ontario as at December 31, 1982 and the statements of revenue and expenses and surplus for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the College as at December 31, 1982 and the results of its operations for the year then ended in accordance with the basis of accounting described in note 1 applied consistently with that of the preceding year.

Toronto, Canada
March 25, 1983

Thorne Riddell

Chartered Accountants

B

THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO (Incorporated under the Health Disciplines Act, Part II, of Ontario)

BALANCE SHEET AS AT DECEMBER 31, 1982

ASSETS	1982	1981	LIABILITIES	1982	1981
GENERAL FUND					
Funds held in trust (note 2)	\$ 9,525	\$ 31,656	Trust funds	\$ 9,525	\$ 31,656
Cash	417,594	694,711	Accounts payable	69,107	34,424
Investment in bonds and bank deposits	1,108,398	970,313	Deferred revenue, licentiate fees ...	852,118	827,600
Accounts receivable	47,106	78,370		930,750	893,680
Prepaid expenses	10,250				
Receivable from Professional Liability Insurance Fund	400,824		Surplus	1,062,947	881,370
	\$1,993,697	\$1,775,050		\$1,993,697	\$1,775,050

PROFESSIONAL LIABILITY INSURANCE FUND

Cash	\$ 481,989	\$ 686,689	Deferred revenue, members' assessments	\$ 425,270	\$ 415,380
Investment in bonds and bank deposits	2,676,737	1,564,765	Provision for unsettled claims (note 3)	589,000	491,000
Accounts receivable	65,096	118,806	Payable to General Fund	400,824	
			Surplus	1,808,728	1,463,880
	\$3,223,822	\$2,370,260		\$3,223,822	\$2,370,260

CENTENNIAL FUND

Cash	\$ 26,021	\$ 22,683			
Interest receivable	198	299			
	\$ 26,219	\$ 22,982	Surplus	\$ 26,219	\$ 22,982

HARRY R. ABBOTT MEMORIAL LIBRARY FUND

Cash	\$ 1,387	\$ 1,424	Surplus	\$ 1,387	\$ 1,424
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THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO
GENERAL FUND
STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1982

	1982	1981
Revenue		
Licence, registration and examination fees		
Dentists	\$1,586,433	\$1,532,662
Less portion attributable to the Professional Liability Insurance Fund	551,540	534,175
	1,034,893	998,487
Hygienists	108,679	96,880
Examination fees	42,800	36,299
Interest	248,052	244,615
Property rent	2,200	2,900
Sundry	11,824	10,726
Continuing education	56,531	43,902
	1,504,979	1,433,809
Expenses		
Salary and salary charges	404,349	346,966
Postage and courier	37,481	22,961
Printing, stationery and supplies	71,163	75,490
Telephone	16,029	12,417
Equipment - purchase, rental and maintenance	33,739	21,178
Property expenses	80,127	39,962
Staff travel	43,603	38,901
Examinations	34,060	38,929
Honoraria	177,719	149,911
Continuing education	85,831	72,691
Student relations		395
Professional fees	189,032	173,038
Consulting fees	14,081	
Council insurance	1,495	1,495
Council and committee	72,396	59,667
Dentaguide		53,276
Radiation safety survey	22,638	
Grants		
Canadian Dental Association	23,575	23,000
Canadian Fund for Dental Education	1,000	1,000
University of Toronto	3,300	3,300
University of Western Ontario	2,300	2,300
Other	2,569	
Sundry	6,915	4,297
	1,323,402	1,141,174
EXCESS OF REVENUE OVER EXPENSES	181,577	292,635
SURPLUS AT BEGINNING OF YEAR	881,370	588,735
SURPLUS AT END OF YEAR	\$1,062,947	\$ 881,370

D

**THE ROYAL COLLEGE OF DENTAL SURGEONS
OF ONTARIO**

PROFESSIONAL LIABILITY INSURANCE FUND

**STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1982**

	1982	1981
Revenue		
Members' assessments	\$ 551,540	\$ 534,175
Interest	348,394	311,242
	899,934	845,417
Expenses		
Insurance premium	113,655	113,844
Broker and consultant fees	16,238	13,377
Insurance adjuster	24,184	9,478
Claims	63,925	85,341
Provision for unsettled claims (note 3) ..	312,788	303,000
Administration charge from general fund	20,000	15,000
Sundry	4,296	1,641
	555,086	541,681
EXCESS OF REVENUE OVER EXPENSES	344,848	303,736
SURPLUS AT BEGINNING OF YEAR	1,463,880	1,160,144
SURPLUS AT END OF YEAR	\$1,808,728	\$1,463,880

E

**THE ROYAL COLLEGE OF DENTAL SURGEONS
OF ONTARIO**

CENTENNIAL FUND

**STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1982**

	1982	1981
Revenue		
Interest	\$ 3,287	\$ 3,752
Expenses		
Professional fees	50	50
EXCESS OF REVENUE OVER EXPENSES	3,237	3,702
SURPLUS AT BEGINNING OF YEAR	22,982	19,280
SURPLUS AT END OF YEAR	\$26,219	\$22,982

F

**HARRY R. ABBOTT MEMORIAL
LIBRARY FUND**

**STATEMENT OF REVENUE AND EXPENSES
AND SURPLUS
YEAR ENDED DECEMBER 31, 1982**

	1982	1981
Revenue		
Interest	\$1,813	\$1,403
Expenses		
Grant to University of Toronto		
Library Fund	1,850	1,475
EXCESS OF EXPENSES OVER REVENUE	37	72
SURPLUS AT BEGINNING OF YEAR	1,424	1,496
SURPLUS AT END OF YEAR	\$1,387	\$1,424

G

**NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 1982**

1. Accounting Policies

The College follows generally accepted accounting principles except that the cost of furniture, equipment and leasehold improvements is included in expenses as incurred (1982, \$46,304; 1981, \$13,345).

2. Segregated Funds

At December 31, 1982 the Association maintained in trust \$9,525 (1981, \$21,656) for refund to patients following claims made against member dentists. A further \$10,000 estate grant was held in 1981.

3. Professional Liability Insurance Fund

This fund was established by the College by allocating a portion of the fees charged to Dentists on an annual basis as approved by the Board. The insurance coverage for claims has been established to cover validated claims in excess of a deductible portion on an annual basis. The College is liable for the first \$25,000 (1981, \$25,000) of a validated claim subject to a maximum loss limit on an annual basis of \$300,000 (1981, \$250,000). The Dentists are liable to the College for a deductible portion on each validated claim of \$250 (1981, \$250). The College is additionally liable for all insurance adjuster fees related to claims arising since January 1, 1977. Provision has been recorded in the accounts for the liability with respect to unsettled claims and the insurance adjuster fees related thereto. Final settlement of claims are subject to satisfactory resolution between the insurance company and the College.

4. Long Term Lease

In 1972 the land and building at 230 St. George Street was sold to The Ontario Dental Association for \$2. The Royal College of Dental Surgeons of Ontario has leased the land and building from The Ontario Dental Association for a period of twenty-five years expiring September 30, 1997 for \$1 plus various operating charges as specified in the lease with an option to renew for an additional twenty-five years and a right of first refusal on any offer for purchase of the property.

Statistical

STATISTICAL REPORT YEAR ENDING DEC. 31, 1983

LICENSED DENTISTS DECEASED

Afari, G., (1972)	July 1983
Aitken, E.S., (1919)	Jan. 9, 1983
Albus, L.W., (1979)	Dec. 21, 1983
Baird, E.G., (1956)	Dec. 19, 1983
Booker, R.E., (1951)	Dec. 18, 1983
Coppel, D.L., (1938)	Sept. 23, 1983
Echlin, R.E., (1952)	Feb. 18, 1983
Garfield, B.D., (1922)	Feb. 26, 1983
Guenther, R.G., (1950)	Oct. 23, 1983
* Hoffman, R.W., (1916)	Dec. 25, 1983
Leslie, H.E., (1935)	Feb. 6, 1983
* Moore, S.R., (1909)	Feb. 20, 1983
Sullivan, W.C., (1937)	June 26, 1983
Sultaminis, G., (1956)	Sept. 29, 1983
Thayer, R.O., (1951)	April 10, 1983
Walsh, J.L., (1923)	June 28, 1983

* Denotes Life Member (Year of Graduation)

ADDITIONS TO THE REGISTER

University of Toronto	101
University of Western Ontario	48
N.D.E.B. Certificates	73
General Licence (from Education)	24
Academic Licence	0
Approved by the Registration Committee	0

LICENCES ISSUED

Dentists

* 5027 Members

*(Includes 12 Life Members and 254 Out-of-Province Members)

Dental Hygienists

2206

REMOVALS AND REINSTATEMENTS

Left Ontario	14
Deceased	12
Retired	16
Not Renewing	37
Removed	20
Reinstated	34

AGE RANGE OF DENTISTS BY COUNTY

County, District, Region	Less than 31	31-40	41-50	51-60	61-65	Over 66	Total
BRANT	6	21	8	1	3	—	39
BRUCE	5	10	1	1	2	1	20
DUFFERIN	—	5	4	1	—	1	11
ELGIN	2	12	2	5	1	—	22
ESSEX	22	69	20	22	8	2	143
FRONTENAC	7	28	10	4	11	2	62
GREY	2	12	5	7	—	2	28
HALDIMAND NORFOLK	5	10	7	3	—	3	28
HALIBURTON	—	1	1	—	—	—	2
HALTON	32	53	36	13	6	—	140
HASTINGS	6	21	9	7	2	3	48
HURON	6	7	2	2	—	1	18
KENT	10	16	8	6	2	2	44
LAMBTON	16	26	3	7	5	2	59
LANARK	4	5	3	3	1	—	16
LEEDS GRENVILLE	3	12	6	6	1	2	30
LENNOX ADDINGTON	—	1	4	—	—	1	6
METRO TORONTO	334	519	375	238	113	82	1661
MIDDLESEX	45	75	43	40	16	9	228
MUSKOKA	4	3	3	4	—	2	16
NIAGARA	37	60	35	35	8	10	185
NORTHUMBERBLAND	3	10	4	2	3	—	22
DURHAM	23	59	26	15	5	—	128
OTTAWA CARLTON	58	131	79	55	18	12	353
OXFORD	2	13	9	5	4	—	33
PEEL	65	109	54	13	5	3	249
PERTH	3	12	4	3	4	—	26
PETERBOROUGH	3	21	12	5	3	2	46
PRESCOTT RUSSELL	3	9	2	1	2	—	17
PRINCE EDWARD	2	—	2	1	1	—	6
RENFREW	5	18	4	7	—	1	35
SIMCOE	25	45	19	13	7	3	112
STORMONT DUNDAS GLEN.	7	11	5	4	—	2	29
VICTORIA	—	6	4	—	2	1	13
WATERLOO	22	64	34	25	6	7	158
WELLINGTON	9	25	14	8	4	2	62
HAMILTON WENTWORTH	27	78	42	39	12	15	213
YORK	33	49	20	14	3	1	120
ALGOMA	11	19	15	12	5	—	62
COCHRANE	11	16	5	2	—	—	34
KENORA KENORA P.P.	6	8	5	1	1	—	21
MANITOULIN	4	—	—	—	1	—	5
NIPISSING	3	9	10	9	1	—	32
PARRY SOUND	3	4	1	3	—	1	12
RAINY RIVER	2	2	1	3	—	—	8
SUDBURY	20	23	15	14	3	2	69
THUNDER BAY	19	32	16	9	—	4	80
TIMISKAMING	2	2	4	5	1	—	14
Totals	917	1741	991	673	270	181	4773
Percentage of Total	19.2	36.5	20.7	14.1	5.7	3.8	100

RATIO OF DENTISTS TO POPULATION IN ONTARIO

Dec. 31, 1983

POPULATION8,715,800

NUMBER OF DENTISTS4,773

RATIO1:1826

Electoral District	County Region or District	Assessed Population	No. of Dentists	Dentist/Population
No. 1	Frontenac	108,895	62	1:1756
	Lanark	47,080	16	1:2943
	Leeds, Grenville	81,270	30	1:2709
	Lennox, Addington	32,925	6	1:5488
	Prescott, Russell	53,686	17	1:3158
	Renfrew	87,802	35	1:2509
	Stormont, Dundas and Glengarry	101,195	29	1:3489
	Regional Municipality of Ottawa-Carleton	555,440	353	1:1573
	TOTALS	1,068,293	548	1:1949

Population Ratio

1983 1:1949

1982 1:2079

No. 2	Hastings	107,170	48	1:2233
	Northumberland	65,217	22	1:2964
	Peterborough	103,477	46	1:2250
	Prince Edward	22,405	6	1:3734
	Victoria	48,330	13	1:3718
	Haliburton	11,397	2	1:5699
	Regional Municipality of Durham	290,417	128	1:2269
	TOTALS	648,413	265	1:2447

Population Ratio

1983 1:2247

1982 1:2475

No. 3	Algoma	136,130	62	1:2196
	Cochrane	98,012	34	1:2883
	Kenora	60,207	21	1:2867
	Manitoulin	10,894	5	1:2179
	Nipissing	80,059	32	1:2502
	Rainy River	22,828	8	1:2854
	Sudbury	187,019	77	1:2429
	Thunder Bay	155,861	80	1:1948
	Timiskiming	41,223	14	1:2945
	TOTALS	792,233	333	1:2379

Population Ratio

1983 1:2379

1982 1:2566

No. 4	Metropolitan Toronto	2,138,659	1,661	1:1288
	York Region	268,855	120	1:2240
	TOTALS	2,407,514	1,781	1:1352

Population Ratio

1983 1:1352

1982 1:1411

Electoral District	County Region or District	Assessed Population	No. of Dentists	Dentist/ Population
No. 5	Bruce	60,158	20	1:3008
	Dufferin	31,763	11	1:2888
	Grey	74,120	28	1:2647
	Huron	56,355	18	1:3130
	Simcoe	228,311	112	1:2038
	Districts of Muskoka	38,705	16	1:2419
	Parry Sound	33,878	12	1:2823
TOTALS		523,290	217	1:2411

Population Ratio

1983 1:2411

1982 1:2360

No. 6	Elgin	70,033	22	1:3183
	Essex	313,209	143	1:2190
	Kent	107,337	44	1:2439
	Lambton	124,600	59	1:2112
	Middlesex	321,531	228	1:1410
	TOTALS	936,710	496	1:1889

Population Ratio

1983 1:1889

1982 1:1974

No. 7	Brant	105,402	39	1:2703
	Oxford	86,534	33	1:2622
	Perth	66,196	26	1:2546
	Wellington	131,447	62	1:2120
	Regional Municipality of Hald-Norfolk	89,845	28	1:3209
	Regional Municipality of Waterloo	310,781	158	1:1967
	TOTALS	790,205	346	1:2284

Population Ratio

1983 1:2284

1982 1:2368

No. 8	Regional Municipality of Halton	258,229	140	1:1844
	Hamilton-Wentworth	414,591	213	1:1946
	Niagara	369,232	185	1:1996
	Peel	507,090	249	1:2037
	TOTALS	1,549,142	787	1:1968

Population Ratio

1983 1:1968

1982 1:1972

DEGREE OF 'BUSYNESS' OF ONTARIO DENTISTS / 1983

Years since Graduation	Number of DDS Responding	% of Respondents Less Busy than Would Like	% of Respondents Content with Patient Load	% of Respondents Too Busy
0-4	557	68.6	30	1.4
5-9	792	61	37.6	1.4
10-14	657	46.3	52	1.7
15-19	500	37.4	60.4	1.2
20-24	353	36.8	61.5	1.7
25-29	292	34	63.6	5.4
30-34	317	25.2	69.7	5.1
35-39	85	20	73	7
above 50	122	18	78	4

PRESIDENTS

*B.W. Day	Apr. 1868 - Jun. 1870
*H.T. Wood	Jun. 1870 - Jul. 1874
*C.S. Chittenden	Jul. 1874 - May 1889
*H.T. Wood	May 1889 - Mar. 1893
*R.J. Husband	Mar. 1893 - Apr. 1899
*G.E. Hanna	Apr. 1899 - Apr. 1901
*A.M. Clark	Apr. 1901 - Apr. 1903
*H.R. Abbott	Apr. 1903 - Apr. 1907
*R.B. Burt	Apr. 1907 - Apr. 1909
*G.C. Bonnycastle	Apr. 1909 - May 1911
*W.J. Bruce	May 1911 - May 1913
*D. Clark	May 1913 - May 1915
*W.C. Davy	May 1915 - May 1917
*W.C. Trotter	May 1917 - May 1918
*W.M. McGuire	May 1918 - May 1921
*M.A. Morrison	May 1921 - May 1923
*A.D.A. Mason	May 1923 - May 1925
*E.E. Bruce	May 1925 - May 1927
*R. Gordon McLean	May 1927 - May 1929
*S.S. Davidson	May 1929 - Jun. 1931
*S.M. Kennedy	Jun. 1931 - May 1933
*H. Irvine	May 1933 - May 1935
*G.H. Holmes	May 1935 - May 1937
*E.C. Veitch	May 1937 - May 1939
*L.D. Hogan	May 1939 - May 1941
*F.A. Blatchford	May 1941 - May 1943
*G.H. Campbell	May 1943 - May 1945
*S.W. Bradley	May 1945 - May 1947

*H.W. Reid	May 1947 - May 1949
*S.J. Phillips	May 1949 - May 1951
*R.O. Winn	May 1951 - May 1953
C.M. Purcell	May 1953 - May 1955
*R.J. Godfrey	May 1955 - May 1957
*M.C.G. Bebee	May 1957 - May 1959
*M.V.J. Keenan	May 1959 - May 1961
*A.H. Leckie	May 1961 - Apr. 1963
W.G. Bruce	Apr. 1963 - Apr. 1965
J.P. Coupland	Apr. 1965 - Feb. 1967
J.D. Purves	Feb. 1967 - Jan. 1969
H.M. Jolley	Jan. 1969 - Jan. 1971
N.L. Diefenbacher	Jan. 1971 - Jan. 1973
P.P. Zakarow	Jan. 1973 - Jan. 1975
R. Paul McCutcheon	Jan. 1975 - Jan. 1977
E.G. Sonley	Jan. 1977 - Jan. 1979
A.J. Calzonetti	Jan. 1979 - Jan. 1981
C.A. Doughty	Jan. 1981 - Jan. 1983
R.L.J. Filion	Jan. 1983 -

SECRETARIES

*J. O'Donnell	Apr. 1868 - Jul. 1870
*J.B. Willmott	Jul. 1870 - Jun. 1915
*W.E. Willmott	Jul. 1915 - May 1940
*Don. W. Gullett	May 1940 - Jul. 1956
Wesley J. Dunn	Jul. 1956 - Feb. 1965
Kenneth F. Pownall	Feb. 1965 -

*Deceased







PROCEEDINGS

1984

Annual Report

THE ROYAL COLLEGE OF DENTAL SURGEONS
OF ONTARIO

1984 Proceedings

ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO

230 St. George Street, Toronto, Ontario M5R 2N5

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REPORT OF THE R.C.D.S. PRESIDENT / 1984

Richard L.J. Filion, D.D.S.

The last two years during which I have had the great pleasure of serving as your president have been truly memorable. Typical of this Council was a desire to begin a communicative process with the people we licence, in order to bring a certain participatory element to professional self-government. By and large this policy was well received and I can say that at the end of this Council's term there existed among the membership a better feeling and understanding about the R.C.D.S.

We have attempted to develop among our members a sense of regard for the public interest because it was deeply believed that such a consideration is a cornerstone of professional self-government. Our new President, Dr. Pitkin has stated that he wishes this policy to continue and grow.

Many references have been made recently that self-government is in danger of being lost by the dental profession and it is also said that this is because the profession has not conducted itself in a manner deserving self-government. From my observations as



your president, if self-government is indeed at risk it is not from the aforementioned causes but rather from a feeling of apathy and lack of participation in the system by our members – a phenomenon which is all too common in all forms of government these days. The struggle to preserve self-government must be like any other contest – we derive the most good from it when we are the participants, not the spectators. These are serious days for dentistry and self-government and it will not suffice to delegate decision making to hired professionals and “policy-makers”. What is required is for us to think about the directions in which we want this profession to go and to direct those who serve the profession to implement those directions. We are all capable of making good decisions based on what is right and in the public interest. One of the greatest problems in this

society is the growing isolation and distance between elected officials and those who elect them – the dentists and hygienists of this province must never let this happen to us.

The struggle to preserve self-government must be like any other contest – we derive the most good from it when we are the participants, not the spectators.

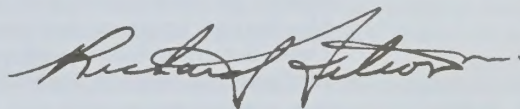
During the last two years we have examined ways to reduce the growing cost of running the College. As many of you know, these escalating costs have resulted in a substantial renewal fee increase. There is nothing to believe that licence fees will not continue to rise in the future. One way that substantial savings can be achieved, not to mention the benefits to the public and profession is by adopting a more remedial philosophy towards those who allow themselves to become deficient in their professional performance. Council will continue to look at ways of resolving these problems by means of upgrading courses rather than spending the funds required to prosecute a member.

Another excellent program which we approved was one which will be run in cooperation with the O.D.A. and the Don-

wood Institute. This program will assist our members who become dependent on chemicals – be they drugs or alcohol. The College will render whatever assistance is required by a member to receive help with his problem. We see this as an increasing menace in our profession and we want to do everything possible to prevent our members from becoming the victims of this problem.

As you will see from reading the various Committee reports this Council has not been idle. We have attempted to nurture good feelings about the R.C.D.S. We have completed certain tasks and laid the groundwork to resolve others. My council and senior staff were most helpful to me and without their cooperation my job would have certainly been impossible.

I have enjoyed serving as your president and I thank you for the opportunity you provided to me to give a little back to this great profession.



Richard L.J. Filion, D.D.S.
President

Committees 1984-85

President: Dr. R.L.J. Filion
Vice-President: Dr. J.I.H. Fawcett

STATUTORY COMMITTEES

Executive: R.L.J. Filion, Chairman;
J.I.H. Fawcett, G.E. Pitkin,
J.K. Hunter, J.A. Monteith,
*J.A. Pearce

Registration: L.V. Taylor, Chairman;
J.K. Hunter, E. Swadron,
*J.A. Pearce

Discipline: J.I.H. Fawcett, Chairman;
K.S. Mathers, W.R. Hilliard,
R.M. Matsui, L.V. Taylor,
G. Nikiforuk, E. Swadron,
R. Thomas, *L. Mickelson

Complaints: J.K. Hunter, Chairman;
W.H. Treleaven, J.A. Monteith,
*J.A. Pearce

STANDING COMMITTEES

Education: R.M. Matsui, Chairman;
W.R. Hilliard, R.T. Lang,
L. Mickelson

Finance & Property: W.R. Hilliard, Chairman;
J.I.H. Fawcett, G.E. Pitkin,
W.H. Treleaven, R. Thomas,
L. Mickelson

Legal & Legislation: R.T. Lang, Chairman;
K.S.M. Mathers, W.R. Hilliard,
J.I.H. Fawcett, E. Swadron,
J.A. Pearce

Professional Liability Insurance: L.V. Taylor, Chairman;
R.T. Lang, G. Nikiforuk,
R.N. Jack, L. Mickelson

Anaesthesia & Sedation: G.E. Pitkin, Chairman;
L.V. Taylor, R.M. Matsui, and a
Representative from each dental
faculty, the Ontario Society of Oral &
Maxillofacial Surgeons, the Ontario
Dental Society of Anaesthesiology and
the Conscious Sedation Study Club

R.C.D.S./O.D.A. Liaison: R.L.J. Filion, Chairman;
R.T. Lang, G.E. Pitkin, R. Thomas,
J.A. Pearce

R.C.D.S./O.D.H.A. Liaison: J.I.H. Fawcett, Chairman;
J.A. Monteith, G. Nikiforuk,
L. Mickelson

AD HOC COMMITTEES

Manpower: G.E. Pitkin, Chairman;
J.K. Hunter, K.S.M. Mathers,
E. Swadron, J.A. Pearce

Quality Assurance: W.H. Treleaven, Chairman;
G. Nikiforuk, R.M. Matsui,
K.S.M. Mathers, J.I.H. Fawcett,
R. Thomas

Redistribution: W.H. Treleaven, Chairman;
R.M. Matsui, Mrs. E. Swadron,
L.V. Taylor

Delivery of Dental Care to Patients in Institutions, Public Health and Collective Living Centres: K.S.M. Mathers, Chairman;
G.E. Pitkin, L.V. Taylor,
G. Nikiforuk, J.I.H. Fawcett,
J.A. Monteith, L. Mickelson,
J.A. Pearce

Dental Implants: G.E. Pitkin, Chairman;
J. Cox, J. Druck, L. Pedlar,
P. Watson

**May be invited to attend any meeting of the Committee (without voting privileges) where matters involving dental hygiene or a specific dental hygienist are to be considered.*

The Council

DISTRICT, UNIVERSITY AND LAY REPRESENTATIVES

DISTRICT REPRESENTATIVES

District 1

W.H. (Trev) Treleven, D.D.S. represents the counties of Dundas, Frontenac, Gengarry, Grenville, Lanark, Leeds, Lennox, Addington, Prescott, Russell, Renfrew and Stormont and the Regional Municipality of Ottawa-Carleton.



He was born in Winnipeg, Manitoba, and attended elementary and high school there. Before joining the R.C.A.F., Trev taught public school in Manitoba and after three years service and further study he received his dental degree from the University of Toronto in 1951.

"Trev" practised as an associate in Winnipeg for one year before moving to Kingston where he has practised since 1952. He was President of the Kingston and District Dental Society in 1958 and 1968 and served on the O.D.A. Board of Governors for six years, four of which were on the Executive Council.

He has been active in many community organizations in Kingston including the Rotary Club, YM-YWCA, Kingston figure Skating Club, Kingston Ability Centre and is an elder of St. Margaret's United Church. Trev and his wife Betty have five children and when time permits they enjoy travel and curling.

His College activities include serving as Chairman of the Quality Assurance Committee and as a member of the Property and Finance and Complaints Committees.

District 2

James I.H. Fawcett, D.D.S. from Lindsay is the representative. His constituency includes the Regional Municipality of Durham and the counties of Hastings, Northumberland, Peterborough, Prince Edward, Victoria and Haliburton.



He was born in Toronto and, after attending Vaughan Road Collegiate, graduated from the University of Toronto, Faculty of Dentistry in 1959. Jim was a dental intern at Philadelphia General Hospital for one year and established a general practice in Lindsay after a 1-1/2 year stay in Toronto.

He served as President of the Peterborough and District Dental Society in 1966-67 and is active in local politics. Jim was a member of Lindsay Town Council from 1965-1970 and is presently Chairman of the Board of Parks Management. He is also a Trustee of Cambridge Street United Church.

He is currently Vice-president of the Council of the R.C.D.S. and serves as Chairman of the Discipline and R.C.D.S.-O.D.H.A. Liaison Committees. He also sits on the Executive, Finance and Property, Quality Assurance, Supervision of Hygienists and Legal and Legislation Committees.

District 3

Richard L.J. Filion, D.D.S. represents Northern Ontario. This includes the Districts of Algoma, Cochrane, Kenora, Manitoulin, Nipissing, Rainy River, Sudbury, Thunder Bay and Timiskiming. He was born in Sudbury and, after receiving his high school education in Sturgeon Falls, attended the



University of Toronto's Faculty of Dentistry, graduating in 1966. He has practised in Sudbury since that time.

This year, much of his time has been taken up with the Presidency of the College but when time permits, Richard pursues his interest in flying, fishing, photography and gardening.

As President of the College, he serves on most committees, has attended many dental society meetings across the province and has also represented the R.C.D.S. on the national level.



District 4 is made up of the Municipality of Metropolitan Toronto and the Regional Municipality of York. Because of its large population, this district has two representatives on Council. They are Rollin M. Matsui, D.D.S. and Gary E. Pitkin, D.D.S.

Rollin Matsui was born in Toronto and attended Jarvis Collegiate Institute. He obtained a B.Sc. degree from Victoria College at the University of Toronto in 1975 and a dental degree from the same University in 1979.

Rollin has practised in Toronto since graduation and has recently established his own dental practice. He is an associate in dentistry at the University of Toronto demonstrating in periodontics.

Rollin and his wife Paula have one son. Rollin's College activities include the chairmanship of the Education Committee and membership on the Discipline, Anaesthesia and Sedation and Ad Hoc Quality Assurance Committees.



Gary Pitkin was born in Toronto and received his high school diploma from St. Michael's College School before attending the Faculty of Dentistry at the University of Toronto, graduating in 1966.

Since that time, he has practised in Agincourt and has actively participated in many areas of organized dentistry. Gary has served all levels of the East Toronto Dental Society including its presidency in 1973-74. He was an Ontario governor to the Canadian Dental Association and also served as President of the Ontario Dental Association in 1979-80.

Gary has an interest in sedation techniques and has served as the Chairman of the Anaesthesia and Sedation Committee, the Ad Hoc Committee on Manpower, the Ad Hoc Committee on Implants and is also a member of the Executive and R.C.D.S./O.D.A. Liaison Committees.

Gary's outside interests include the video industry, travel and the Blue Jays. He is married to Kass and has two children, Lana and Daniel.



District 5

Warren R. Hilliard, D.D.S. represents the counties of Bruce, Dufferin, Grey, Huron and Simcoe and the Districts of Muskoka and Parry Sound.

He attended Orangeville and District High School and the University of Guelph before entering the Faculty of Dentistry at the University of Toronto. He obtained his D.D.S. in 1974 and has practised in the town of Orangeville since that time.

Warren and his wife Dorothy, who is a Registered Nurse, have two sons and he is an active member of the Orangeville Lions Club. His hobbies include fishing, hunting and ultra-light flying.

His College responsibilities include the chairmanship of the Finance and Property Committee and membership on the Education, Discipline and Legal and Legislation Committees.



District 6

Lorne V. Taylor, D.D.S. represents Southwestern Ontario which consists of Elgin, Essex, Kent, Lambton and Middlesex counties including the cities of London and Windsor.

Lorne was born in Toronto and, after graduating in dentistry from the University of Toronto in 1944, served in the Canadian Army Dental Corps for two years. He practised general dentistry in London until 1966 when he limited his practice to endodontics. He is a Diplomate of the American Board of Endodontics and has taught at both Faculties of Dentistry in Ontario. He is past-president of the London and District Dental Society and a past-governor of the Ontario Dental Association.

He is Chairman of the Registration and Professional Liability Insurance Committees and also sits on the Anaesthesia and Sedation, Discipline and Ad Hoc Supervision of Dental Hygienists Committees.



District 7

Kerry S. Mathers, D.D.S. represents the counties of Brant, Oxford, Perth, Wellington and the Regional Municipalities of Haldimand-Norfolk and Waterloo.

He was born in Toronto, Ontario, attended Kitchener-Waterloo Collegiate and Vocational School and obtained his D.D.S. from the University of Toronto in 1961.

He served in the Royal Canadian Dental Corps from 1961 to 1964 and has been in private general practice in Kitchener since leaving the service. He was President of the Waterloo-Wellington Dental Society in 1972-73 and was a member of the Region of Waterloo District Health Council from 1977 to 1979.

Kerry is Chairman of the Commission on worship of St. Andrew's Presbyterian Church in Kitchener and is married and father of two sons.

His College activities include chairmanship of the Ad Hoc Committee on Supervision of Dental Hygienists and membership on the Discipline, Legal and Legislation, Ad Hoc Manpower and Quality Assurance Committees.



District 8

Randy T. Lang, D.D.S. represents District 8 which includes the Regional Municipalities of Halton, Hamilton-Wentworth, Niagara and Peel.

He attended Gordon Graydon and Richview Secondary Schools and received his D.D.S. from the University of Toronto in 1966.

Dr. Lang received his diploma in Orthodontics from the University of Toronto in 1969 and has practised that specialty in Mississauga since that time.

Dr. Lang is the orthodontic consultant to the Editorial Board of Oral Health, is a member of the orthodontic teaching staff of the Faculty of Dentistry, University of Toronto and a past-president of the Ontario Society of Orthodontics. He has served as the orthodontic consultant to the Registration Committee of the R.C.D.S.

His College duties include the chairmanship of the Legal and

Legislation Committee and membership on the Education, Professional Liability Insurance and the R.C.D.S./O.D.A. Liaison Committees.

UNIVERSITY REPRESENTATIVES



Gordon Nikiforuk, D.D.S. represents the University of Toronto, Faculty of Dentistry. He was born in Redfield, Saskatchewan and, after receiving his pre-dental training at the University of Saskatchewan, received his dental degree from the University of Toronto in 1947. He received his M.Sc. in Biochemistry from the University of Illinois in 1950 and received a specialty certificate in paedodontics in 1955. He received his Fellowship in the Royal College of Dentists of Canada in 1966.

Gordon has had a distinguished academic career including service as Acting Dean, U.C.L.A. School of Dentistry, 1968-69 and Dean, Faculty of Dentistry, University of Toronto, 1970 to 1977.

He is currently Professor in the Department of Preventive Dentistry at the University of Toronto, senior staff dentist at the Hospital for Sick Children and the President of the Canadian Association for Dental Research.

He has received many honours during his career and has published over 80 papers relating to scientific and educational topics.

Among Dr. Nikiforuk's College responsibilities are membership on the Discipline, Professional Liability Insurance, Quality Assurance and Supervision of Dental Hygienists Committees.



J. Keith Hunter, D.D.S. is the University of Western Ontario representative. He was born in Lauder, Manitoba and attended secondary school near Hamilton. He graduated from the Faculty of Dentistry, University of Toronto, in 1958 and practised in Hamilton for 20 years before taking post-graduate course in Endodontics at the University of Michigan in Ann Arbor and receiving his M.Sc. degree. He became certified as an Endodontist in late 1981 and holds a Fellowship in the International College of Dentists.

Keith is presently on staff of the Faculty of Dentistry, University of Western Ontario, serving as Chairman of the Division of Endodontics and lives in Schomberg, Ontario, where dairy farming and flying occupy his leisure time. He is Chairman of the Complaints Committee and sits on the Executive and Registration Committees of the College.

LAY REPRESENTATIVES

Provincial Legislation provides that the Council shall include between three and five persons who are not members of the College. The current lay representatives appointed by the Lieutenant Governor in Council are Mr. James Monteith, Mrs. Eunice Swadron and the Rev. Rondo Thomas.



James Monteith was born in Fort Frances, Ontario and obtained his elementary and secondary education in Petrolia. He was an honour graduate in civil engineering from the University of Toronto in 1950.

Experience as a Soils Engineer in Ontario and as a Field Engineer for construction firms in New Zealand and Australia led to his present role as a Consulting Civil Engineer with his own firm in Petrolia. Jim has a keen interest in flying and is a member of several professional associations. He enjoys tennis, golf and curling, is married and has two daughters.

He sits on the Complaints, Executive, R.C.D.S./O.D.H.A. Liaison and Ad Hoc Supervision of Dental Hygienists Committees and will be retiring at the end of the 1984 Council year.



Eunice Swadron was born and raised in Toronto and graduated from Lakeshore Teachers College in 1960. She taught for three years in Scarborough, is active in the Hadassah-WIZO organization and sits on the Synagogue Board for Beth Tikvah and is the President of her Sisterhood.

She is married and has three sons and enjoys boating and cross-country skiing with her family.

Her College activities include the Discipline, Registration, Legal and Legislation and Ad Hoc Manpower Committees.



Rondo Thomas was born in New Westminster, B.C. and attended school in Surrey, B.C. He served in the R.C.A.F. from 1957 to 1965 and graduated from the North West Bible College in Edmonton in 1969. He served as a Missionary in Frobisher Bay, N.W.T. for six years (1969 to 1975) and was ordained as a Minister in 1970. Rondo served as pastor of Flemington

Pentecostal Church and as well on several interfaith chaplaincy committees at the provincial and federal levels.

He is married with four daughters and studies psychology in his spare time.

His College activities include the Discipline, R.C.D.S./O.D.A. Liaison and Ad Hoc Quality Assurance Committees.

the Executive, Registration, Complaints, Legal and Legislation, R.C.D.S./O.D.H.A. Liaison, Ad Hoc on Manpower and Supervision of Dental Hygienists Committees.



Lynda Mickelson is the official dental hygiene observer representing all of the province except Toronto and York Region. She graduated in 1964 from the University of Toronto dental hygiene program. She is employed in private practice in Thunder Bay and also serves as a clinical demonstrator for dental hygiene at Confederation College.

She has been active in many dental and dental hygiene organizations serving as President of the Thunder Bay Dental Hygiene Society, Director of the O.D.H.A. and Chairman of Component Societies Liaison for that organization.

Lynda obtained her H.B.A. in philosophy in 1981 and continues her academic studies at Lakehead University. She and her husband Harold enjoy many outdoor activities.

Her College duties include the Education, Finance and Property, Professional Liability Insurance, R.C.D.S./O.D.H.A. Liaison and Supervision of Dental Hygienists Committees.

HYGIENIST OBSERVERS

In 1980, the Council of the R.C.D.S. approved the election of two dental hygienists as "official observers" who would be invited to participate in various committee work of the College when matters involving a dental hygienist or dental hygiene in general are discussed.



Jocelyn Pearce is the hygienist representative for the Toronto area. She graduated from the University of Toronto dental hygiene program in 1976 and practises on a part-time basis. She lives in Thornhill, Ontario and spends her non-working hours looking after her husband and two children and enjoys crafts, cross-country skiing and cooking. She serves as the

dental hygienist observer on several College committees including

Staff



Dr. Kenneth F. Pownall, D.D.S.

Registrar,
Secretary/Treasurer



Dr. Edward Fox, D.D.S.
Deputy Registrar

- ☐ Discipline
- ☐ Malpractice
- ☐ Complaints



Dr. Donald McFarlane, D.D.S.
Assistant-to-the-Registrar

- ☐ Complaints Officer
- ☐ Education & College Publications
- ☐ Anaesthesia & Sedation



Mr. Frank Greer
Inspector

- ☐ Discipline
- ☐ Investigations
- ☐ Illegal Practice



Mrs. Linda D. Strevens, B.Sc.D.
Executive Assistant

- ☐ Education
- ☐ Auxiliary Liaison
- ☐ Investigations

Solicitors
Shibley, Righton & McCutcheon

Auditors
Thorne Riddell

Bankers
The Royal Bank of Canada



R.C.D.S. COUNCIL 1983-1984

Bottom Row: J.I.H. Fawcett (Vice-President), R.L.J. Filion (President), K.F. Pownall (Registrar/Secretary), J.K. Hunter, G.E. Pitkin

Middle Row: R.T. Lang, R.P. Thomas, E. Swadron, L. Mickelson, L.V. Taylor, W.R. Hilliard

Top Row: K.S.M. Mathers, W.H. Treleaven, G. Nikiforuk, R.M. Matsui (Not Shown: J.A. Monteith, J.A. Pearce)

Education

REPORT OF THE EDUCATION COMMITTEE

Chairman: R.M. Matsui, D.D.S.

Committee Members: W.R. Hilliard, D.D.S.,
R.T. Lang, D.D.S., L. Mickelson



The Education Committee continued to be very active in 1984 looking after the licensing of dental hygienists and the continuing education programs of the R.C.D.S.

DENTAL HYGIENE

The Committee reviewed and clarified the examination process for dental hygienists.

At the R.C.D.S. Licensing Examinations held for Community College graduates, there were 36 failures among a total of 170 candidates. This represented a failure rate of approximately 21.2%, a significant improvement from that in 1983 (36.9%). It appeared that this year's candidates were better prepared. Of the 19 candidates who took the Expanded Duty Dental Hygiene Examination, all were successful. At the Licensing Examinations held for Out-of-Province dental hygienists, 3 of 11 candidates failed.

Finally, of the 33 candidates who took the Supplemental Licensing Examination, there were 5 failures.

The Committee reviewed the "Report of the Minister's Task Force on Dental Hygiene", which made recommendations on improving the dental hygiene courses throughout Ontario. Among several points raised were:

- 1) emphasizing and increasing the clinical component of the training of dental hygiene students
- 2) the accreditation of all Community College Dental Hygiene programs
- 3) moving toward the elimination of the R.C.D.S. Licensing Examinations.

It was apparent that the R.C.D.S. position requiring a two year dental hygiene program prior to sitting the Licensing Examinations was *not* being supported by the Task Force. However, the matter is still under further study.

CONTINUING EDUCATION

As in the past, the R.C.D.S. Continuing Education programs were offered to all Local Dental Societies in the province. (A list of the courses provided follows.) Each Dental and Dental Hygienists' Society was offered two one-day lectures and one two-day seminar (or participation course) from the R.C.D.S. Speakers List. The selection of the course was entirely up to the individual Society. It was intended that this subsidized program would enhance attendance at continuing education courses in general.

The Committee continued to expand the R.C.D.S. Videotape Li-

brary and in particular the College shall be obtaining the ADA/VCE videotapes from the American Dental Association. It is hoped that these will be available in 1985 for lending to the membership.

The Committee is actively pursuing the creation of dental refresher courses at the University of Toronto and especially at the University of Western Ontario. The courses are and will be of a remedial and/or upgrading nature and will be utilized as necessary on matters brought before the Complaints, Executive or Discipline Committees. For instance, a course in Oral Diagnosis and Radiology has already been used for such purposes.

R.C.D.S.-sponsored X-Ray Safety Courses approved by the H.A.R.P. Commission were again held during 1984. Members are reminded that, where applicable, the deadline for dental assistants having taken such a course is July 1, 1985.

Council deliberated on the issue of the use of the designation "Fellowship in the Academy of General Dentistry" (F.A.G.D.) after a dentist's name, and concluded that the designation "F.A.G.D." cannot be utilized.

The Committee is continuing to explore the area of public education, but is presently monitoring existing programs in Quebec, the United States and those of the Canadian Dental Association.

ACKNOWLEDGEMENTS

It has been a privilege and an honour to serve as Chairman of the Education Committee for the past term 1983-1984. My sincere gratitude is extended to the members of my Committee who have worked hard and responsibly on your behalf in the best interests of the public.

The invaluable support provided to the Committee by the College Staff, and in particular Dr. D. McFarlane and Mrs. L. Strevens, should also not go unnoticed. Their contributions are most heartily appreciated.

CONTINUING EDUCATION PROGRAMS - DENTISTS

Brockville Dental Society

Friday, March 2, 1984

Ralph I. Brooke

"An Approach to the Diagnosis and Treatment of Oral Pain including Temporomandibular Joint Problems"

Friday, October 12, 1984

Steven Small

"Review and Update of Current Concepts of Local Anaesthesia Techniques"

Elgin Dental Society

Wednesday, January 18, 1984

Gurkan Altuna

"The Bionator and Frankel Appliances in the Correction of Class II Malocclusion & Class I Openbite Malocclusion"

Kenora/Rainy River Dental Society

Friday and Saturday, May 4, 5, 1984

Ross Barlow

"Radiology"

Friday and Saturday, November 2, 3, 1984

Frank Short

"Periodontics"

Kent County Dental Society

Friday, March 23, 1984

Dorothy McComb

"Current Aesthetic Restorative Materials"

Kingston and District Dental Society

Friday, June 22, 1984

Aaron H. Fenton

"Today's Prosthodontics"

Kirkland Lake and District Dental Society

Friday, February 3, 1984

John F. Cox

"Transplants and Implants"

Friday, November 2, 1984

David Mock

"Current Concepts in Oral Medicine and Pathology"

Lambton County Dental Society

Wednesday, February 8, 1984

Robert E. Lorey

"Crown and Bridge"

London and District Dental Society

Friday, April 6, 1984

Maurice Hirst

"The Changing Nature of Pharmacological Pain Control – Clinical Aspects of Endorphins and Enkephalins"

and

Patricia A. McGrath

"Practical Strategies to Minimize Pain by Maximizing the Importance of the Situation to Modify Acute & Chronic Pain"

North Bay and District Dental Society

Friday, November 23, 1984

Kevin Dann

"Sedation Management and Pain Control"

Owen Sound and District Dental Society

Friday, April 6, 1984

Robert S. Turnbull

"Surgical Treatment of Periodontal Disease"

Oxford County Dental Society

Friday, March 8, 1984

Franklin Pulver

"Paedodontics 1984 – Examination, Behaviour, Trauma, Pulp Therapy, Restorative Dentistry and Anterior Esthetics"

Peterborough and District Dental Society

Friday, February 17, 1984

Thomas D. Daley

"Current Topics in Oral Pathology"

Friday, November 16, 1984

Barry Korzen

"Contemporary Endodontics"

Porcupine Dental Society

Friday, January 6, 1984

Andrew G. Andrews

"Complicated Extractions and Their Management"

Friday, February 3, 1984

Herbert J. Adirim

"Acupuncture"

Renfrew County Dental

Friday, December 7, 1984

Dan Morrow

"New and Current Treatment Methods in Periodontics for the 80's"

Rideau District Dental Society

Monday, May 28, 1984

Robert S. Turnbull

"Periodontics for the General Practitioner with Surgical Procedures for the General Practitioner"

Monday, September 17, 1984

Gurkan Altuna

"Functional Orthodontics for the General Practitioner"

Monday, November 12, 1984

John E. Speck

"TMJ – Diagnosis and Treatment for the General Practitioner"

Sault Ste. Marie and District Dental Society

Friday, May 25, 1984

M. Suzuki

"Current Development in Operative Dentistry – 1) Composite Restorative Materials 2) The Cast-Etched Bridge"

Friday, October 26, 1984

Richard Emery

"Oral Surgery For The General Practitioner"

Stratford and District Dental Society

Friday, April 27 and Saturday, April 28, 1984

Samuel M. Borden

"A Rational Approach to the T.M.J. Pain-Dysfunction Problem"

Friday, November 23, 1984

Dorothy McComb

"Current Esthetic Restorative Material and Clinical Use"

Sudbury and District Dental Society

Friday, January 13, 1984

John H. Gryfe

"Surgery You Can and Should Do in your Office, and Handling Complicated Surgery"

Friday, March 16, 1984

Murray L. Arlin

"Implants and Transplants – Tooth Transplants; Dental Implants; Periodontal Implants; Transplants"

Thunder Bay Dental Society

Friday, April 13 and Saturday, April 14, 1984

Andrew G. Andrews

"Practical Office Oral Surgery Procedures and Complicated Extractions and Their Management"

Saturday, October 27, 1984

Irwin Lightman and Hugh F. MacKay

"Geriatric Dentistry"

Wingham and District Dental Society

Wednesday, March 21, 1984

David Mock

"Current Concepts in Oral Medicine and Pathology"

Wednesday, April 18, 1984

Elgin S. Thompson

"Integrating Practical Preventive Measures into General Practice"

**CONTINUING EDUCATION PROGRAMS –
DENTAL HYGIENISTS**

Algoma and District Dental Hygienists' Society

Saturday, November 10, 1984

Howard M. Stein

"Preventive Dentistry – Fluorides, Sealants, Restoration for Primary Teeth, Acid Etch Restorations"

Saturday, April 28, 1984

Jenny Thomas

"The Utilization of the Dental Hygienist in Private Practice with Emphasis on Periodontal Skills"

Durham Dental Hygienists' Society

Saturday, December 1, 1984

Thomas D. Daley

"Common Oral Diseases and Oral Cancers"

Halton and Peel Dental Hygienists' Society

Saturday, March 24, 1984

Murray L. Arlin

"Implants and Transplants in Periodontal Therapy – Miracle Material or Mighty Marketing"

Hamilton Dental Hygienists' Society

Saturday, March 3, 1984

Jane Walker

"Use of the Phase Contrast Microscope as it Applies to Periodontal Treatment"

Kingston and District Hygienists' Society

Saturday, February 11, 1984

Jenny Thomas

"The Utilization of the Dental Hygienist in Private Practice with Emphasis on Periodontal Skills"

Niagara Region Dental Hygienists' Society

Saturday, April 28, 1984

Edward Henderson

"Medical Emergencies"

and

Eric J. Holowaty

"Communicable Diseases"

Saturday, November 24, 1984

Gerald Z. Wright

"Managing Children in the Dental Office"

Northwestern Ontario Dental Hygienists' Society

Friday, November 2, 1984

Elgin S. Thompson

"Revitalizing Your Preventive Practice"

Ottawa Dental Hygienists' Society

Wednesday, April 25, 1984

Lothar Huebsch

"A.I.D.S. – Implications to the Dental Profession"

Saturday, November 3, 1984

John Hardie and Jenny Thomas

"Oral Care of Patients with Special Needs"

Peterborough Dental Hygienists' Society

Saturday, April 28, 1984

William J. Fleming

"Preventive Dentistry"

Sarnia Lambton Dental Hygienists' Society

Saturday, October 20, 1984

William K. Hettenhausen

"Preventive Techniques and Nutrition for All Ages"

Sudbury Dental Hygienists' Society

Saturday, March 31, 1984

Jenny Thomas

"The Utilization of the Dental Hygienist in Private Practice with Emphasis on Periodontal Skills"

Thunder Bay Dental Hygienists' Society

Saturday, June 2, 1984

Dan Tomlak

"Recent Advances in Oral Surgery"

Toronto Central Dental Hygienists' Society

Saturday, January 14, 1984

Jenny Thomas

"The Utilization of the Dental Hygienist in Private Practice with Emphasis on Periodontal Skills"

Toronto North Dental Hygienists' Society

Saturday, April 28, 1984

William K. Hettenhausen

"Generating Health in the Oral Environment"

Waterloo-Wellington Dental Hygienists' Society

Saturday, January 28, 1984

Hugh F. MacKay

"Prognosis for the 80's"

Windsor-Essex Dental Hygienists' Society

Saturday, February 25, 1984

Howard M. Stein

"Preventive Dentistry - Fluorides, Sealants, Restoration for Primary Teeth, Acid Etch Restorations"

Saturday, November 10, 1984

Maxillofacial Speech Clinic Members

"Assessment and Rehabilitation of the Cleft Lip Palate Patient"

CONTINUING EDUCATION PROGRAMS

A Two-Day Refresher Course for Practising and Non-Practising Expanded Duty Dental Hygienists was held on Friday and Saturday, February 24 and 25, 1984

This program was presented by the College in co-operation with the Department of Restorative Dentistry, Faculty of Dentistry, University of Toronto.

SPECIAL GRANTS

London & District Dental Society

Northern Ontario Dental Association Convention

Rendezvous '84 - Thunder Bay

O.D.H.A. Winter Clinic Day

RADIATION SAFETY COURSES FOR DENTAL ASSISTANTS

Brockville

Dr. Ross Barlow and

Dr. Paula Sikorski

October - November

Kenora

Dr. Ross Barlow

May

Sault Ste. Marie

Dr. Ross Barlow and Dr. Paul Sikorski

November-December

CONTINUING EDUCATION TOPICS AND SPEAKERS**Acupuncture**

Dr. H.J. Adirim - Toronto, Ontario

Anaesthesia and Sedation

Dr. R. Boyar - University of Manitoba

Dr. S. Small & Staff - University of Toronto

Community Dentistry

Dr. R.A. Brandon - University of Western Ontario

Dr. D.W. Lewis - University of Toronto

Dr. H.J. Stockton - University of Manitoba

Dental Materials

Dr. K. Asgar, Dr. R.G. Craig, Dr. J. Dennison,

Dr. J.M. Powers - University of Michigan

Dental Medical Emergencies

Dr. R. Boyer - University of Manitoba

Dr. Small & Staff - University of Toronto

Dr. L.G. Upton - University of Michigan

Endodontics

Dr. A. Arshawsky - University of Toronto

Dr. F.B. Burns - University of Toronto

Dr. A.B. Chapnick - University of Toronto

Dr. J.F. Corcoran - University of Michigan

Dr. B. Korzen - University of Toronto

Dr. L. Lenkinski - University of Toronto

Dr. M. Levine - University of Toronto

Dr. M. Litchen Endo/Perio - University of Toronto

Dr. W.H. Pulver - University of Toronto

Dr. B. Singerman - University of Toronto

Dr. D.H. Skinner - University of Western Ontario

Esthetic Dentistry

Dr. C.B. Cartwright & Staff - University of Michigan

Forensic Odontology

Dr. George Burgman - Niagara Falls, Ontario

Gerontology

Dr. D.W. Banting - University of Western Ontario

Dr. I. Lightman - Baycrest/Mt. Sinai Hospital

Dr. H. MacKay - University of Toronto

Hypnosis

Dr. V. Rausch - Waterloo, Ontario

Medical Related Subjects

Dr. A.M. Bryans - Queen's University

Dr. D. Davis - McMaster University

Dr. J.E. Devitt - University of Ottawa

Dr. W.H. Francombe - University of Toronto

Dr. E.M. Waring - University of Western Ontario

Microbiology

Dr. C. Dawes - University of Manitoba

Occlusion

Major M. Ash, Jr. - University of Michigan
Dr. C.B. Cartwright - University of Michigan

Operative/Restorative Dentistry

Dr. C.B. Cartwright - University of Michigan
Dr. G.T. Charbeneau - University of Michigan
Dr. J.D. Dennison - University of Michigan
Dr. D.R. Gratton - University of Western Ontario
Lt.-Col. W. Gray - Canadian Forces
Dr. L.N. Johnson - University of Western Ontario
Dr. F.W. Kahler - University of Michigan
Dr. R.E. Lorey - University of Michigan
Dr. A.N. Louka - University of Manitoba
Dr. D.B. McAdam - University of Toronto
Dr. D. McComb - University of Toronto
Dr. E.R. McPhee - University of Michigan
Dr. I. Stangel - McGill University
Dr. M. Suzuki - University of Western Ontario
Dr. W.R. Teteruck - University of Western Ontario
Dr. P.A. Watson - University of Toronto
Dr. P. Yaman - University of Michigan

Oral Diagnosis

Dr. S. Ahing - University of Manitoba
Dr. R.M. Courtney - University of Michigan
Dr. J.P. Gobetti - University of Michigan
Dr. H.D. Millard - University of Michigan
Dr. C.O. Munroe - University of Toronto
Dr. N.H. Rowe - University of Michigan
Dr. M. Tyler - McGill University

Oral and Maxillofacial Surgery

Dr. A.G. Andrews - University of Toronto
Dr. A.J. Ballard - University of Toronto
Dr. A.J. Becker - Toronto, Ontario
Dr. J.B. Curran - University of Manitoba
Dr. J.H. Gryfe - Weston, Ontario
Dr. R.D. Listrom - University of Toronto
Dr. E. Millar - McGill University
Dr. P.R. Morgan - University of Toronto
Dr. I.D.F. Schofield - University of Western Ontario
Dr. L.G. Upton - University of Michigan
Dr. S. Weinberg - University of Toronto

Oral Medicine and Pathology

Dr. R.I. Brooke - University of Western Ontario
Dr. R.M. Courtney - University of Michigan
Dr. T.D. Daley - University of Western Ontario
Dr. J.P. Gobetti - University of Michigan
Dr. C.L.B. Lavelle - University of Manitoba
Dr. J.H.P. Main - University of Toronto
Dr. H.D. Millard - University of Michigan
Dr. D. Mock - University of Toronto
Dr. J.A. Pedlar - University of Toronto
Dr. N.H. Rowe - University of Michigan
Dr. B.J. Sessle - University of Toronto

Orthodontics

Dr. G. Altuna - University of Toronto
Dr. R.O. Fisk - University of Toronto
Dr. B. Hemrend - University of Toronto
Dr. W.W. Hunter - University of Western Ontario
Dr. J. Jenkins - University of Toronto

Dr. R. Lang - University of Toronto
Dr. F. Popovich - University of Toronto
Dr. D.G. Woodside - University of Toronto

Paedodontics

Dr. H. Cross - University of Manitoba
Dr. R.E. Diamond - University of Manitoba
Dr. C. Dexter - McGill University
Dr. J. Geller - University of Toronto
Dr. D.W. Johnston - University of Western Ontario
Dr. N. Levine - University of Toronto
Dr. J. Maltz - University of Toronto
Dr. A.P. Morawa - University of Michigan
Col. K.R. Morley - Canadian Forces
Dr. F. Pulver - University of Toronto
Dr. R.H. Sawusch - University of Michigan
Dr. H. Stein - University of Toronto
Dr. K. Titley - University of Toronto
Dr. G.Z. Wright - University of Western Ontario

Periodontics

Dr. D. Anderson - University of Toronto
Dr. M. Arlin - University of Toronto
Dr. F.G. Burgett - University of Michigan
Dr. R.G. Caffesse - University of Michigan
Dr. T. Chin-Quee - McGill University
Dr. F. Compton - University of Toronto
Dr. S.E. Corber - University of Toronto
Dr. D.A. Deporter - University of Toronto
Dr. E. Freeman - University of Toronto
Dr. D. Glick - University of Toronto
Dr. A.F. Holthuis - University of Manitoba
Dr. J. Linghorne - University of Toronto
Dr. A.H. Melcher - University of Toronto
Dr. D.S. Moore - University of Western Ontario
Dr. P.A. Novak - University of Toronto
Dr. G. Pearson - University of Toronto
Dr. J. Perlus - University of Toronto
Dr. J. Sim - University of Toronto
Dr. R.S. Turnbull - University of Toronto
Dr. A. Winnick - University of Toronto

Pharmacology in Dentistry

Dr. J. Brebner - University of Toronto
Dr. W.A. Mahon - University of Toronto
Dr. I.M. Rollo - University of Manitoba
Dr. W.H.E. Roschlaw - University of Toronto
Dr. W.C. Sturtridge - University of Toronto
Dr. F.A. Sunahara - University of Toronto

Preventive Dentistry

Mrs. N. Burgess - University of Toronto
Dr. D.C. Clark - McGill University
Dr. W.J. Fleming - University of Toronto
Dr. W.K. Hettenhausen - Thunder Bay (Y.T.F.L.)
Dr. D.S. Moore - University of Western Ontario
Dr. G. Nikiforuk - University of Toronto
Maj. M.F. Pilon - Canadian Forces
Dr. J. Sandham - University of Toronto
Dr. E.S. Thompson - University of Western Ontario

Prosthodontics

Dr. S.M. Borden - University of Manitoba
Dr. A.H. Fenton - University of Toronto

Dr. F.L. Greenwood – University of Toronto
 Dr. D. Kepron – McGill University
 Dr. W.E. Kotowicz – University of Michigan
 Dr. W.B. Love – University of Manitoba
 Dr. B.R. Lang – University of Michigan
 Dr. H.F. MacKay – University of Toronto
 Dr. M.E. Razzoog – University of Michigan
 Dr. P.S. Sills – University of Western Ontario
 Dr. D. Smith – University of Manitoba
 Dr. F.W. Smith – University of Michigan
 Dr. G.A. Zarb – University of Toronto

Radiology

Ms. M.G. Alibranti – McGill University
 Dr. W.R. Barlow – University of Toronto
 Dr. S. Brooks – University of Michigan
 Dr. S.M. Fireman – University of Toronto
 Dr. F.G. Kellam – University of Toronto
 Dr. M.J. Pharoah – University of Toronto
 Dr. J.A. Reid – University of Western Ontario
 Dr. D.W. Stoneman – University of Toronto

Utilization of Dental Auxiliaries

Dr. J.E. Chasteen – University of Michigan
 Ms. S. Feller – University of Manitoba
 Ms. W. Kerschbaum – University of Michigan
 Ms. J. McGowan – University of Michigan
 Dr. D.S. Moore – University of Western Ontario
 Ms. J. Thomas – Ottawa Civic Hospital
 Ms. M. Werner – University of Manitoba

R.C.D.S./O.D.A Co-Sponsored Programmes are still available, as well as Two-Day Seminar Programmes arranged with University of Western Ontario.

VIDEOTAPES

1. Complete Dentures
2. Immediate Dentures
3. Dental Office Emergencies
4. Duplication of the Natural Dentition for Immediate Dentures
5. Examination of Occlusion
6. Dynamics of Occlusion
7. Periodontal Surgery
8. Periodontal Examination
9. Partial Denture Design
10. Removable Partial Dental Clinical and Laboratory Procedures
11. Removable Partial Dentures Clinical Procedures
12. Oral Surgical Procedures
13. Fabrication of a Biteplate
14. Occlusal Reconstruction and Restoration
15. Endodontics
16. The Hygienist in Orthodontics
17. Chairside Microscopy for Dental Practitioners
18. Interview – Hiring and Firing
19. Effective Chairside Assisting
20. Examination of Head and Neck
21. Endodontics Biochemical Obturation
22. Endodontics Surgery
23. Dental Assisting in Endodontics
24. Multiple Extractions under Local Anaesthetic and I.V. Sedation
25. Separation of Molar Teeth
26. Indirect Orthodontic Bracket Bonding
27. Radiographic Technique – Paedodontics
28. 2 Diet Counselling interviews
29. The Long Cone Parallelizing Technique
30. The World of Healthy Smiles is Brushing Enough
31. Salivary Lactobacillus Estimation using Dentocult
32. Endodontic Diagnostic Procedures
33. Dental Nutrition
34. Oral Hygiene for Dependent Residents
35. Clinical Evaluation, Physical Management and Introduction of Nitrous Oxide for Paedodontic Patient
36. Veneering using Light-cured Resins
37. Periodontal Examination – 1984
38. Aids – After the Fear
39. Aids – A Challenge to Health Care Professionals
40. It Starts With A Letter – The Complaints Mechanism of the College

U. of T. Report

REPORT OF THE DEAN OF THE FACULTY OF DENTISTRY

UNIVERSITY OF TORONTO

A.R. TenCate, B.D.S., Ph.D.



This is my seventh report to Council as my term as Dean expired June 30, 1984. But The University in its wisdom has seen fit to re-appoint me for a further and final five year term. I very much appreciate this confidence bestowed on me and I can assure Council that I will continue to do all I can to ensure that the Province of Ontario has quality Faculty of Dentistry capable of advancing and adjusting to changing times. The past year has, on the whole, been a successful one in spite of the many problems that have accompanied the construction programme but this is almost at an end, and then this Province will have a physical facility in Toronto for the education of dentists of which all can be proud.

RETIREMENTS

The past academic year has seen the retirement of Drs. D. Beierl, A.M. Hunt and F.G. Kellam. All have served the Faculty and the Profession well in many different ways. Dr. A.M. Hunt in particular has played a pivotal role and his contributions to Canadian dentistry were speedily recognized when, in the space of three months, public subscription raised sufficient funds to establish an annual Murry Hunt Lectureship. The inaugural lecture was given by Dr. John Evans, former President of the University of Toronto and Director of the World Bank.

NEW APPOINTMENTS

The Faculty is particularly fortunate this past year to have been able to make ten new appointments. This is not a reflection of a new munificence by Government to the University, or of the University to the Faculty, but rather our ability to compete for, and win, salaries in national competition amongst all the health sciences. Thus in addition to the replacement of the 4 hard money positions we have gained five other positions. They are: (1) an M.R.C. Scholarship; (2) two Provincial Scientist Awards, (3) a Rosenstadt Professorship, and (4) a grant supported salary.

Our new appointments are:

1. Dr. H. Limeback - D.D.S., Ph.D. (Biochemistry).
2. Dr. C. McCulloch - D.D.S., Dip.Perio., Ph.D.
3. Dr. H. Tenenbaum - D.D.S. Dip.Perio. Ph.D.
4. Dr. C. Lee - Ph.D. (Materials Science).
5. Dr. M. Segal - D.D.S., Dip. Paedo., M.Sc.
6. Dr. M. Pharoah - D.D.S., M.Sc. Radiology.
7. Dr. R. Cox - D.D.S., Dip. Prosthodontics, M.Sc.
8. Dr. R. Winslow - M.Sc. Mathematics; M.Sc., Ph.D.
9. To be appointed - Community Dentistry.

I would point out that these appointments are not only crucial for the continued viability of the School but they also reflect the next generation of Canadian dental academics and, so far as I am concerned, the future is secure for Toronto. One of the above appointments deserves special comment, the appointment of our

Rosenstadt professor, Dr. Winslow. This is a one-year appointment and the intent of this appointment is to seek from the Medical Research Council of Canada a long-term development grant with which to develop within the Faculty a facility for computer assisted imaging - a technology we believe will have considerable significance for clinical diagnosis in the very near future.

INTRA-FACULTY APPOINTMENTS

The ill-health of Dr. A.B. Hord has forced the appointment Dorothy McComb as acting head of the department of operative dentistry. Dr. McComb is well-known to the profession in Ontario and I am certain she will do an excellent job under difficult circumstances. Dr. A.H. Melcher, our Director of Postgraduate and Graduate Education has been appointed as Associate Dean of the Graduate School - a rare distinction - and his position has been filled by Dr. A. Bennick.

DISTINCTIONS

Faculty continue to play a prominent role internationally, nationally, provincially and locally.

As examples I cite the Presidency of the International Association for Dental Research and the Presidency of the Ontario Society for Public Health. Furthermore many faculty have received invitations to lecture in most parts of the world. It is also worth stating that in the past year we have had graduate students, post-doctoral students and visiting professors from Australia, Brazil, China, Saudi Arabia, Japan and Israel. Dr. Melcher has been appointed to the Medical Research Council.

Within the University Dr. D. Smith serves on Governing Council; Dr. Melcher, as already mentioned, is Dean for Division IV of the Graduate School and I served as a Presidential appointee to the Academic Affairs Committee of Governing Council.

EDUCATION

In the past year the University of Toronto graduated 145 students from this Faculty as follows:

D.D.S.	117
B.Sc.D.	1
M.Sc.	7
Ph.D.	1
Diplomas	19

The undergraduate intake for the 1984-85 session was 104 so our total enrolment for the current session is 532 broken down as follows:

Undergraduate	437
B.Sc.D.	6
Masters	23
Ph.D.	9

Diplomas	43
Combined M.Sc/Diploma	4
Combined Ph.D/Diploma	2
Interns	28

RESEARCH AND SCHOLARLY ACTIVITY

The best way to illustrate activity in this area is to state that eighty-three publications emanated from the Faculty in the past year. I would suggest that the subjects covered show that, the depth and breadth of the activity within the Faculty, is one which can probably not be matched by any other Faculty in North America.

ISSUES

Each year I have raised issues of which I think Council should be aware. This year rather than raise issues of crisis I wish to raise the issue of clinical education. A Faculty of Dentistry such as ours faces many problems in educating a dental practitioner, but the most restrictive is the fact that students, once they leave our doors, are fully-fledged practitioners, licenced by law to practice the entire range of dentistry upon human beings without the legal requirement to receive ever one iota of further instruction. This places an enormous responsibility upon Faculties of Dentistry everywhere and because of it many sound educational practices must be sacrificed to this responsibility.

We are about to introduce into our curriculum the concept of a clerkship which, it is hoped, will achieve two things – a better educational setting and graduates with a slightly different, but better, experience as they embark on a lifetime of practice. What a clerkship entails is a third year structured programme in which students will be exposed to the various sub-disciplines of dentistry in such a way that the patient, the chair, the instructor and the job are all pre-assigned. This ensures a good staff teaching ratio and a better ability to assess student performance. On completion of the structured programme the students then enters a clerkship in which they are given 4–6 carefully selected patients requiring a spectrum of dental services. Students will be expected to develop and complete a treatment plan for each and then, as part of their final assessment, defend the treatment of their clerkship patients. In this way we will be substituting patient completion as a significant requirement rather than the excessive accumulation of credits for individual procedures. I cite this change to illustrate to Council that the Faculty is by no means static in its approach to improving the educational experience of our students and indeed this change should properly be included in the research activity of the School. We are fairly confident of success with the clerkship for a pilot project two years ago was well received by both students and staff.

Another educational change – made against some resistance – is the combining of fixed and removable prosthodontics in the undergraduate curriculum with the aim of teaching the restoration of occlusion as a single body of knowledge. Again only time will tell whether this is a correct move but is cited as another example of experiment, as the undergraduate curriculum is continually honed.

Finally, to illustrate the value of your Faculty being at the cutting edge of new knowledge and the benefit this has to the undergraduate student, Council should know that our experience in the field of osseous integration is already making us consider when it will be appropriate for us to introduce this modality of treatment into our undergraduate curriculum.

I was pleased to have had the opportunity, once more, of presenting this report. Council can be assured that all is well with the

Faculty of Dentistry at the University of Toronto and it appreciates and acknowledges the support it receives from the College.

U.W.O Report

REPORT OF THE DEAN OF THE FACULTY OF DENTISTRY

UNIVERSITY OF WESTERN ONTARIO

Ralph I. Brooke, B.Ch.D., L.D.S., F.D.S., R.C.S., M.R.C.P., L.R.C.S.



ACCREDITATION

I am pleased to report that the Faculty obtained full accreditation for the Undergraduate Program and also for the Graduate Program in Orthodontics.

ENROLMENT

Enrolment will be reduced to 40 students per year from the present 56, commencing in September 1984. It is hoped that the reduction in teaching load will enable members of the faculty to have more time for research. Although the Faculty will be taken off "academic maintenance" at this time, it is not anticipated that there will be any loss in full-time faculty. Minor reductions in other parts of the budget will be necessary but it is anticipated that, over the coming years, the replacement of senior faculty by more junior ones will offset the reduction in income which is a consequence of the cut in enrolment.

ENDOWMENT FOR DENTAL RESEARCH

An Endowment for Dental Research was established during the academic year. Over \$125,000 had been received or pledged by March of 1984. Gratitude must be expressed to the alumni and many other dentists who have contributed. It is very pleasant to note that almost 100 per cent of the full-time faculty and a large percentage of the part-time faculty have become founding members.

ACADEMIC AFFAIRS

The Faculty submitted its Three-Year Plan. In keeping with the mission of the University, the Faculty has stated that, in addition to maintaining its high standard in the undergraduate and graduate programs, it intends to place much greater emphasis on research activity. The creation of the Division of Oral Biology and the successful application for research scientists give evidence that the Faculty is already moving in this direction.

The Faculty continues to hold retreats in order that important matters of policy and planning can be discussed. Divisions have already begun to follow this pattern.

The terms of office of all the Divisional Chairmen have been extended until June 30, 1986.

A Clinical Divisions Promotion and Tenure Committee has been established to take the place of the previous Departmental Committees.

More rigorous teaching and course evaluations have been conducted. Responsibility for these now lies within the Office of the Dean.

Because it was being overloaded, a larger computer has been purchased and installed. It is hoped that this computer will not only be able to cope with the financial aspects of the Faculty but will also be involved in patient records, grading, and research.

The Faculty undertook a review of the Health Professions' Legislation responses from the various professional bodies, this

being transmitted to the Ministry.

A proposal was sent to Omicron Kappa Upsilon to establish a chapter.

FACULTY

Dr. Paul S. Sills was honoured by receiving the U.W.O. Excellence in Teaching Award as well as the OCUFA Teaching Award. This is the first time that a member of the Faculty of Dentistry has won either of these awards.

Dr. J. Douglas Awde was awarded a Terry Fox Fellowship and is undertaking research with Dr. Haydn Bush at Victoria Hospital.

Dr. David H. Charles was awarded the first Wesley and Jean Dunn Fellowship to pursue an M.Sc. Program at the University of Michigan.

Dr. David G. Gardner was elected Vice-President of the American Academy of Oral Pathology.

Dr. Ronald E. Jordan was awarded an Honorary Fellowship of the Royal College of Dentists in Canada.

It was with great regret that we learned of the death, at a tragically early age, of Dr. Igor Bolta. Igor Bolta was one of our most distinguished students and later served as a member of our part-time faculty. The Faculty was extremely saddened by this loss.

VISITORS

Dr. Rex Holland was the annual M.R.C. Visiting Professor. He visited the Faculty from February 28th to March 2nd. The title of his public lecture was "Structural Basis of Pain from Teeth".

The Annual Paediatric and Community Dentistry Lecture was given by Dr. Jon Kapala of Boston University. The title of the lecture given on November 3rd, 1983 was "Mandibular Incisor Crowding".

STUDENTS

It is a pleasure to report that the Fourth Year class graduated with no conditions.

Mr. J. Gordon Payne, a Second Year student, was awarded a two-year Terry Fox Cancer Research Clerkship. It should be pointed out that very few of these are awarded across Canada and there is great competition between the Faculties for these awards.

The London & District Dental Society Student Clinic Night was once again a great success. Mr. Albert Gusenbauer was the winner but the standard of all the other participants was extremely high. They were: Ray Ledderhof, Carolyn Mason, Kevin McCann, Janet Ross and Kirby Warkentin.

Mr. Colin Day, of the Second Year, represented the Faculty at the American Dental Association Student Research Conference in Bethesda, Maryland in March.

The Medical Research Summer Scholars were as follows: Robert Chiasson with Dr. J.E. Stakiw; Colin Day with Dr. T.D. Daley; Sandy Tse with Dr. Colin Anderson; and Dennis Dionne with Dr.

D.R. Gratton. In addition, four students continued in their second year of the Research Training Program which is run jointly with the Faculty of Medicine.

There was a six-week visit by a senior student from Heidelberg University in West Germany.

Requests for transfer from students at two US schools were received and were denied because of the very great variations in programs. Numerous requests were received from foreign dentists to register in the undergraduate program on the basis of advanced standing or to enter into the first year. The Faculty is giving some consideration to what might be done for these dentists in consultation with the Royal College of Dental Surgeons of Ontario.

DIVISION OF ORAL BIOLOGY

The Division of Oral Biology continues to expand. Several appointments have been made, all of them from successful grant applications.

Dr. Harinder Sandu will be coming as an Ontario Ministry of Health Career Scientist to do work in hard tissue research.

Dr. Lawrence Yanover has obtained an M.R.C. Centennial Fellowship to do research in aspects of root caries and microbiology.

Dr. Fern Tepperman has obtained an Ontario Ministry of Health Fellowship to continue her work with Dr. Maurice Hirst on endorphins.

AWARDS

A new award in honour of Donald S. Moore in Occlusal Therapy has been donated by the Branscombe Family Foundation.

The Senior Award in Oral Pathology has been reinstituted with \$100 prize donated by the Division of Oral Pathology.

The Pro Liberis Prize has been replaced by the Ontario Dental Association Proficiency Award.

The two Royal College of Dental Surgeons of Ontario Scholarships have been increased in value from \$250 to \$375 each.

The Royal College of Dental Surgeons of Ontario Award in Basic Health Science has been increased in value from \$200 to \$250.

The International College of Dentists Award has been increased in value from \$200 to \$350.

ADMISSIONS

For 1983-84 academic year, 369 applications were processed (2 less than the previous year). The academic average based on the best two years preceding admission was 79.92. Thirty-one (31) of the 51 class members who received their high school education in Ontario were Ontario Scholars. The average manual score within the Dental Aptitude was 5.55. The number of women applying and being admitted to the Faculty appears to be increasing each year. Ten (10) of 56 students admitted in 1982 were women; 13 in 1983. Twenty-seven (27) members of the class hold degrees.

STUDENT PERFORMANCE

The following are the results of student performance for the academic year 1983-84:

Fourth Year: 54 students, out of which 4 achieved honours (2 with distinction), 50 passed (2 with conditions) and none failed.

Third Year: 56 students, out of which 6 achieved honours, 48 passed (13 with conditions) and 2 failed.

Second Year: 55 students, out of which 9 achieved honours, 46 passed (8 with conditions) and none failed.

First Year: 55 students, out of which 8 achieved honours, 46

passed (10 with conditions) and 1 failed.

RESEARCH

External Research Grants, 1983-84

Awde, J.D., Ontario Cancer Terry Fox Research Fellowship, "The Effect of Cancer Chemotherapeutic Agents on Tumor Cell Cycle Using Kinetics as a Model"

Banting, D.W., industrial grant of \$214,000, "Clinical Trial of a Therapeutic Mouth Rinse"

Faculty of Dentistry, grant of \$1,500 from Canadian Fund for Dental Education, "Research in Dental Education"

Faculty of Dentistry, grant of \$1,000 from Canadian Fund for Dental Education, "Undergraduate Student Research"

Faculty of Dentistry, grant of \$15,000 from Medical Research Council of Canada, "Summer Undergraduate Research Scholarships"

Faculty of Dentistry, grant of \$25,000 from Medical Research Council of Canada, "Dental Research"

Faculty of Dentistry, grant of \$1,000 from The Royal College of Dental Surgeons of Ontario, "Dental Research"

Feasby, W.H., grant of \$8,000 from War Memorial Children's Hospital, Department of Paediatrics, "Nickel Sensitivity"

Gratton, D.R., \$1,000 private donation, "Research in Fixed Prosthodontics"

Hamilton, J.T. and L.W. Hersey, \$7,800 from Employment and Immigration Canada (Canada Works Project), "Basic and Clinical Research in Neuro-muscular Pharmacology"

McGrath, P.A. and R.I. Brooke, renewal grant of \$9,875 from Ontario Ministry of Health, April 1983-1985, "Analgesic Efficacy and Patient Expectation for Pain Relief"

Payne, J. Gordon (Yr. II student) and D. Banerjee, grant of \$6,000 from National Cancer Institute (Terry Fox Cancer Research Fellowship), "Tumour Infiltrating Natural Killer Cells in Hodgkin's Disease"

Reid, J.A., grant of \$2,000 from Canadian Fund for Dental Education, "Contribution to a Data Base for the Assessment of the Radiation to the Public from X-Rays"

Stakiw, J.E., and D.W. Banting, grant of \$7,800 from Employment and Immigration Canada (Canada Works Project), "Oral Biology Research: Diabetes"

Wright, G.Z., a grant of \$2,150 from Ivoclar-Vivadent Technical Services, "Comparison of Two Sealants"

Internal Research Grants, 1983-84

Banting, D.W., \$1,318 from M.R.C. General Support Grant, "Measurement of Pocket Depth Using Ultra-Sound"

Hirst, M., and F.S. Tepperman, grant of \$35,000 from Second Century Fund, "Endorphins, Enkephalins of Opioids in Pain"

Hunter, W.S. (on behalf of graduate students in Orthodontics), \$2,000 from M.R.C. general support grant: D. Wood, "Bonding to Porcelain and Gold"; C. MacPhee, "Polyacrylic vs. Phosphoric Etches"; P. Kalman, "Intrincisal Angulation and Stability"; L. Erickson, "Treatment of Class II Div. 2 Malocclusion"

Kogon, S.L., grant of \$2,000 from M.R.C. General Support Grant, "Sensitivity of Ektaspeed"

Kogon, S.L., J.A. Reid, R.G. Stephens and J.C.F. MacDonald, \$2,800 from Foundation Western, "Preliminary Investigation into the Feasibility of Laser Transillumination of Oral Hard and Soft Tissues"

Reid, J.A., grant of \$4,750 from M.R.C. General Support grant

and \$260 from C.F.D.E. support grant, "Contribution to a Data Base for the Assessment of the Radiation to the Public from X-rays"

Rozanis, J., grant of \$3,000 from M.R.C. General Support Grant, "Periodontopathic Bacterial Collagenase"

Sills, P.S. and H.A. Leeper, grant of \$3,000 from M.R.C. General Support Grant, "Investigation of Palatal Lift Prosthesis"

CONTINUING EDUCATION

Thirteen courses were given during the 1983-84 academic year with an average attendance of 16.

PUBLICATIONS

Our staff added to the reputation of the Faculty by publishing 35 papers in various scientific journals during the past academic year.

REPORT OF THE FINANCE AND PROPERTY COMMITTEE

Chairman: W.R. Hilliard, D.D.S.

Committee Members: J.I.H. Fawcett, D.D.S.,
G.E. Pitkin, D.D.S., R.P. Thomas,
W.H. Treleaven, D.D.S., Lynda Mickelson



OUR FINANCIAL STATUS

The provincial cabinet approved the increase in annual fees for dentists and dental hygienists on October 24th, 1984. The notice of the regulations amendment was published in the Ontario Gazette in the November 10th edition.

Even with the increase it should be noted that we are budgetting for a deficit in 1985. This, coupled with the deficit for 1984, will decrease our general reserve.

BUDGET HIGHLIGHTS

The Committee met on October 18, 1984 and prepared the budget for 1985. The budget was approved by Council in November, 1984 and the details follow:

INCOME

a) Fees and Registration - Dentists

Present members	5,161
Additions	139
TOTAL	5,300
Annual Fee	5,300 x 450 = \$2,385,000
Registration	139 x 100 = 13,900
TOTAL	\$2,398,900

b) Fees and Registration - Hygienists

Present members	2,384
Additions	176
TOTAL	2,560
Annual Fee	2,560 x 100 = \$ 256,000
Registration	176 x 25 = 4,400
TOTAL	\$ 260,400

c) Interest

Interest is derived from our investments. It is difficult to estimate future interest rates at this time.

d) Examination Fees - Hygienists

This item includes income from general licensing examinations, supplemental examinations and expanded duty examinations.

e) Professional Liability Insurance

This is the charge paid to the College from the P.L.I. fund for the costs of the day-to-day administration of the plan. It is increased by approximately 15% from last year.

f) Sundry

This includes income from fines for late payment of annual fees, rent

from the caretaker's apartment and the sale of the list of members to dental related companies.

g) Continuing Education

Each dentist will pay \$50.00 in 1985 for College-sponsored continuing education programs. The fee for hygienists will be \$25.00, and assistants will pay a fee of \$15.00.

EXPENSES

h) Salaries and Charges

Increases in salaries for 1985 are in the range of 5%-6%. It is anticipated that an increase in staff will be required in 1985.

i) Postage and Courier

This item remains the same as last year. An increase in postal rates is expected; however, a decrease in the number of mailings is anticipated.

j) Stationery and Printing

This item remains the same as last year. No increase in quantity is anticipated.

k) Telephone

A slight addition due to the increased number of long distance calls and possible rate increases.

l) Equipment

This item includes the cost of the maintenance contracts on our equipment; i.e. computer, word processing, typewriters, etc. Also included are the purchases of an additional word processing printer, microfilming equipment, file cabinets, and further programming of our data system.

m) Property

This includes the cost of caretaking, taxes, insurance, supplies, etc. See Appendix "C" for breakdown of the costs. A new floor for the area above the Council Chambers is required. In addition, outside painting of the building is required.

n) Council Honoraria

This is difficult to budget because the amount varies directly as the number of meetings that are required to conduct the College's business.

o) Continuing Education

These are the expenses associated with the many lectures and courses provided by the College for dentists and dental hygienists.

p) Professional Fees

This item consists mainly of legal fees; however, it includes audit fees of approximately \$8,000. An increase in the budget is necessary due to increased number of Discipline hearings. Extra consultation with regard to the new Dentistry Act and regulations is included.

q) Council Expenses

This is the cost of travel and accommodation for members of Council on College business.

r) Sundry Expenses

These are minor expenses that do not fall into any other category.

s) Examinations

These are the expenses associated with the cost of conducting examinations for dental hygiene licensure and for expanded duty dental hygienists qualifications.

t) Staff Travel

The functions of the College are province-wide; accordingly, a fair amount of staff time is spent outside Toronto. There is no increase in this item from last year.

u) Council Insurance

This is accident insurance to cover members of Council and clinicians who might be injured or killed while on College business. This was increased in 1984 and is reflected in the 1985 Budget.

v) Professional Liability Insurance

This amount is based on a grant of \$165.00 per dentist; an increase of \$25.00 per dentist from 1984.

w) Student Relations

This is a contribution towards a reception for graduating dental students at the time of licensing.

x) Grants

This includes grants to The University of Western Ontario, the University of Toronto, the Canadian Fund for Dental Education, and the Canadian Dental Association. There is no change from 1984.

y) Consultants' Fees

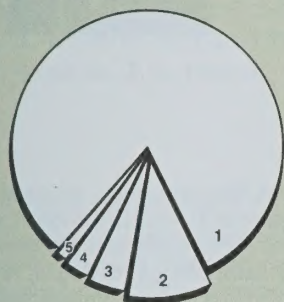
No amount has been budgetted in 1985 for this item.

z) Building Fund

This fund was established in 1984 because of the need for additional office accommodation to conduct the business of the College. The fund is to be used for the purchase of land and/or a building at an appropriate time. An amount of \$200,000 is set aside annually.

1985 BUDGET

1985 BUDGET INCOME (Total \$2,846,000)



1. Fees - Dentists
2. Fees - Dental Hygienists
3. Examination Fees and Continuing Education
4. P.L.I. and Sundry
5. Interest

INCOME	Budget 1984	Actual to Sept. 30	Budget 1985
a) Fees & Registration - Dentists	\$1,691,900	\$1,705,025	\$2,398,900
b) Fees & Registration - Hygienists	124,375	124,435	260,400
c) Interest	100,000	64,170	45,000
d) Examination Fees	35,000	33,400	32,000
e) P.L.I. Income	33,000	33,000	50,000
f) Sundry Income	8,000	9,989	10,000
g) Continuing Education	45,000	30,190	49,700
Total:	\$2,037,275	\$2,000,209	\$2,846,000

EXPENSES

h) Salaries & Charges	\$ 590,000	\$ 366,877	\$ 630,800
i) Postage & Courier	70,000	37,029	70,000
j) Stationery & Printing	100,000	63,853	100,000
k) Telephone	17,000	11,245	18,000
l) Equipment	50,000	32,032	75,000
m) Property	63,150	36,752	64,250
n) Council Honoraria	225,000	210,778	260,000
o) Continuing Education	80,000	51,689	85,000
p) Professional Fees	200,000	209,654	260,000
q) Council Expenses	85,000	74,949	100,000
r) Sundry Expenses	6,000	2,185	6,500
s) Examinations	45,000	44,147	50,000
t) Staff Travel	60,000	32,960	60,000
u) Council Insurance	1,600	2,263	2,300
v) P.L.I. Premium	743,260	713,580	874,500
w) Student Relations	1,000	—	1,000
x) Grants	39,125	33,839	37,550
y) Consultants' Fees	1,500	—	—
z) Building Fund	200,000	200,000	200,000
Total:	\$2,577,685	\$2,123,832	\$2,894,900
Surplus or (Deficit)	(540,410)	(123,623)	(48,900)

1985 BUDGET EXPENSES (Total \$2,894,900)

30.2%	Professional Liability Insurance
23.9%	Salaries and Staff Travel
12.5%	Council Honoraria and Expenses
9.0%	Legal and Accounting Fees
6.9%	Building Fund
6.7%	Postage, Courier Charges, Printing, Supplies, Telephone & Sundry
4.8%	Property Expenses, Taxes and Equipment
4.7%	Continuing Education and Examinations
1.3%	Grants and Student Relations

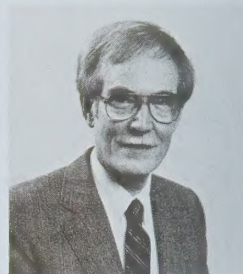
Registration

REPORT OF THE REGISTRATION COMMITTEE

Chairman: L.V. Taylor, D.D.S.

Committee Members: J.K. Hunter, D.D.S., E. Swadron

Hygienist Observer: J.A. Pearce



APPLICATION FOR CERTIFICATION

Thirty-nine applicants were certified as specialists in 1984, each having first qualified and obtained a general licence.

Thirty two of these graduated from Canadian dental schools, three from American dental schools, and four from foreign schools which meet our academic and clinical standards.

Twenty four of our new specialists were trained in Canadian graduate programs; sixteen from the University of Toronto; five from the University of Western Ontario; and one each from Alberta, McGill and Manitoba. Fifteen were trained in American graduate programs.

The following were certified in 1984:

Dental Public Health: Hal A. Leitch.

Endodontics: Robert H. Burchell; Kenneth G. Schafer; Yosef Nahmias.

Oral & Maxillofacial Surgery: John R. Emery; Alfred K. Chu; William H. Wayne; Edward Z. Grodecki; David M. Wright; Mark E. LeMar.

Oral Pathology: Thomas D. Daley

Oral Radiology: Michael J. Pharoah.

Orthodontics: James V. Marko; Betty L. Cragg; Russell B. Farquhar; Gregory J. Vigneux; Oleg Kopytov; Graeme R. Hibberd; V. Wallace Kuzmich; Avrum Rapoport; Peter Kalman; Larry P. Parker; David Wood; Michael A. Sirisko; Murray P. Deller; Luka Popovic.

Paedodontics: Ross D. Anderson; Paul W. MacDonald; Graham E. Brydges; Laurence J. Powers; Olaf B. Plotze.

Periodontics: Edward Glick; Carole Gruson; David F. Hanmer; Donald C. Scott.

Prosthodontics: Allan G. Marshall; Morley S. Rubinoff; Mohammad A. Yarmand; Christopher W. Storey.

Graduates of Canadian dental schools who elect to apply for an N.D.E.B. certificate before March 31st of their graduating year, are granted an N.D.E.B. certificate without examination. This is possible because of the on-going process of accreditation of the undergraduate, graduate and post-graduate programs, in Canadian dental schools. Such certificate is accepted as the education qualification for licensure in Ontario, for up to five years. However, if issued more than five years previously, successful completion of the Part III (clinical component) examination, is required. Of course, all other requirements as set out in Section 26 of the Regulations, must be met, for the issuing or reissuing of a licence for the general practice of dentistry in Ontario.

The Committee met formally on five occasions, to consider inquiries and applications for licensure and/or certification as specialists. The Committee interviewed seven applicants personally, and attended a hearing before the Health Disciplines Board. A detailed study of the Regulations resulted in certain recommendations to Council, which will be considered at a later date.

SPECIALTY CONSULTANTS

Appointed by R.C.D.S.

DENTAL PUBLIC HEALTH

Dr. Neil A. Farrell

ENDODONTICS

Dr. Joel J. Edelson

ORAL PATHOLOGY

Dr. John Pedler

ORAL & MAXILLOFACIAL SURGEONS

Dr. John A. Armitage

ORTHODONTICS

Dr. B. Hemrend

PAEDODONTICS

Dr. G.Z. Wright

PERIODONTICS

Dr. James E. Stakiw

PROSTHODONTICS

Dr. Paul S. Sills

By Specialty Group

Dr. James L. Leake

Dr. Arthur I. Arshawsky

Dr. D.G. Gardner

Dr. George C. White

Dr. R. Bozek

Dr. F. Pulver

Dr. H. Freedman

Dr. Donald R. Kramer

As Chairman, I want to thank the Committee members and the Registrar, Dr. Pownall, for their assistance and sound advice.

REPORT OF THE LEGAL AND LEGISLATION COMMITTEE

Chairman: R.T. Lang, D.D.S.

Committee Members: K.S.M. Mathers, D.D.S.,
W.R. Hilliard, D.D.S., J.I.H. Fawcett, D.D.S.,
E. Swadron, J.A. Pearce



HEALTH PROFESSION'S LEGISLATION REVIEW

Two years ago the Minister of Health named a health profession's legislation review team that was directed to make recommendations about which health professions should be regulated by statute and how statutes governing the professions should be updated.

The last overhaul of legislation began with the report of the Committee on the Healing Arts in 1970 and culminated in the Health Disciplines Act, 1974. Such a review happens only once every decade or two and we at the College believe it is of extreme importance to the future of dentistry.

By enacting the Health Disciplines Act of 1974, the government confirmed the "college system" of self-regulation for the professions of dentistry, medicine, nursing, optometry and pharmacy. The Act established new structures and procedures for ensuring due process in decisions concerning complaints, discipline and registration. It also created the Health Disciplines Board to offer health care consumers a non-judicial avenue of appeal from any decision by one of the colleges.

Initially, the review will determine the form under which currently regulated health professions should continue to be regulated. It will also determine which currently unregulated professions should be brought under the regulatory umbrella. Many professions currently unregulated by statute have indicated a desire for some form of statutory regulation.

The appropriate form of regulation will also have to be decided. Some professions are seeking full-fledged self-regulation along the lines of The Health Disciplines Act. At the other end of the spectrum, professions may prefer regulation in combination with other disciplines under a single governing body.

Perhaps the most important objective of the review is to settle an array of outstanding issues among several of the health care professions. For example, almost all unresolved regulatory issues involve disagreements between adjacent professions about their respective scopes of practice and their role in the delivery of health care.

The review team will consider if the legislation for each profession should define the scope of practice, and if so, what that definition should be. It will ask if licences should be granted conferring an exclusive right to practice, and will consider alternatives, such as permitting specified overlapping scopes of practice or certification i.e. restricting the use of a specified title without restricting the area of practice.

In the fall of 1983, the review team circulated a detailed list of 22 topics for the consideration of all health disciplines, as well as to organizations representing institutions which employ, train or bargain for health professionals, and to consumer and advocacy groups.

The R.C.D.S. submitted a brief replying to all 22 topics. Since this was an open, public process, all submissions were available to the other participants in the review for their reaction and comment.

The review team evaluated the over 120 responses received, and then requested a second submission from each of the responding groups. This second submission was to answer specific questions from the review team which were intended to help clarify or elaborate upon statements made in the first submission.

The review team has recently decided that, for a profession to become self-regulating, it must fulfill nine specific criteria. It has identified 34 groups that definitely do not meet these criteria, and they have now been eliminated from the review process.

The remaining 37 groups that successfully survived this "first cut" will now receive further consideration for self-regulation by the review team. Included in this group are dentists, dental hygienists, denture therapists and dental technicians.

We now enter a new phase of the review's work in which two activities will progress simultaneously. The first of these involves the detailed negotiations between the review team and certain directly affected groups on various profession-specific issues. The second activity comprises a discussion, among all interested parties, of the framework of self-regulation and the protections of "due process" that should be embodied in the new legislation.

The reaction to the review thus far has generally been enthusiastic. Most participants, including the R.C.D.S., are pleased the review is being conducted and appreciate the open format and the opportunity for informal dialogue.

In health care planning, we must recognize the interdependence of all the various disciplines and the need for greater co-operation. The review process, I am confident, will bear fruit; but it will do so most easily and beneficially if all participants keep foremost in mind the commitment which we must all share - to protect and promote the health of the people of Ontario.

PROFESSIONAL INCORPORATION

The Committee presented to Council the following motion:

"That the R.C.D.S. Council notify the Ontario Dental Association that the College supports the concept of professional incorporation and encourages the Ontario Dental Association to pursue this topic with the Provincial Government."

The motion passed unanimously. Dentists in Alberta are able to incorporate their practices. Architects and Engineers are currently able to incorporate their practices in Ontario. Hopefully, the Provincial Government will soon remove the discrimination which exists denying our profession the use of professional corporations.

ASSOCIATESHIP AGREEMENTS

A great deal of the Complaints Committee's time is spent dealing with disputes between dentists and their associates upon termination of an associateship.

The disputes usually fall into 3 main categories:

- 1) who actually owns the patient's records and can the departing associate take his patients and copies of their records with him.
- 2) Relocation disputes occurring when the departing associate opens his new office too close to his previous employer.
- 3) Financial misunderstanding between the principal dentist and the associate when the associateship is terminated.

In an attempt to minimize or solve these disagreements before they occur, the Committee is preparing for the profession guidelines for Associateship Agreements.

CAPITATION

The Committee is currently working closely with the Ontario Dental Association to develop a method of controlling capitation.

CONCLUSION

As Chairman of the Committee, I would like to thank the members of my Committee and the staff of the College for their kind assistance and support.

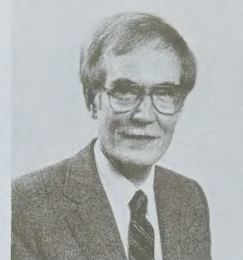
I would like to thank the many members of our profession who have taken the time to inform me of their views and concerns on the many topics under the consideration of the Legal and Legislation Committee.

I encourage all members of our profession to let the College know your views on the subjects that are important to you. When decisions concerning your professional lives are about to be made, your input is extremely vital.

REPORT OF THE PROFESSIONAL LIABILITY INSURANCE COMMITTEE

Chairman: L.V. Taylor, D.D.S.

Committee Members: R.T. Lang, D.D.S.,
G. Nikiforuk, D.D.S., R.N. Jack, D.D.S.,
L. Mickelson



The continuing success of this program has been built upon the accumulated experience and foresight of many individuals over the years. In the 1930's, 1940's and 1950's, the Dentists' Legal Protective Association charged a premium of two dollars per member per year. This provided fairly adequate legal protection at a time when few claims were made, but prudence dictated a more extensive coverage. In 1957, a group liability insurance plan was offered on a voluntary basis to dentists by the R.C.D.S., and in 1973, the present plan came into effect on a compulsory basis.

The public has been protected, as well as the profession, by ensuring that all dentists licensed in Ontario maintain uniform minimum coverage. Individual members and their patients are protected, even after a serious claim, which may not be the case if that dentist's policy were to have been purchased privately. These objectives have been achieved largely by in-house administration and by the self-insuring aspects of the plan.

Relatively small claims are met by our reserves, up to the limit of our stop-loss, passing on to the insurer only the severe losses. Retention and investment of our reserves have created in our hands the funds to meet our responsibilities, including administration, while limiting the liability of the College to a specific amount for each claim. Insurance coverage at the least possible cost per member has thus been possible. The stop-loss acts in conjunction with the group deductible, to limit the College's liability for all claims which may arise in a particular policy year.

Following lengthy negotiations with our underwriter, our insurer was changed. The program for 1985 continues to serve us well, and at competitive rates, although problems in the insurance industry have required an increased premium.

For your information, some statistics are presented.

The Committee urges all members to keep detailed accurate

records that would support the finding that informed consent had been obtained prior to treatment; and to promptly report to our adjuster or to Dr. Fox or Dr. McFarlane or Dr. Pownall, any occurrence which might eventually be the basis of a claim.

TABLE 2

ESTIMATED ASSETS AND LIABILITIES AS OF DECEMBER 31, 1984

ASSETS	1982	1983	1984
Cash in bank	56,619.15	61,618.96	94,819.54
(1) Securities	2,473,857.39	2,303,239.74	2,862,795.58(4)
Interest bearing deposit with securities firm	1,760.00	10,659.52	—
Total assets	\$2,532,236.54	\$2,375,518.22	\$2,957,615.12
LIABILITIES			
(2) Provision for unsettled claims	436,964.68	482,806.30	732,032.65
(3) Provision for adjustors fees	151,865.35	123,600.00	226,300.00
Prepaid 1985 premium	—	—	300,000.00
Total estimated liabilities	\$ 588,830.03	\$ 606,406.30	\$1,258,332.65
Estimated surplus as of Dec. 31st	\$1,943,406.51	\$1,669,111.92	\$1,699,282.47

EXPLANATORY NOTES

- (1) Securities - A mix of long and short term securities - value shown at cost.
- (2) Provision for unsettled claims - The difference between the monies paid in the settlement of claims and our stop-loss limit for the years of coverage.
- (3) Provision for adjustors fees - An estimate based on the numbers of outstanding claims and what, on experience to date, it will cost in adjusting fees to settle these claims.
- (4) Includes \$300,000.00 prepayment from General Fund for 1985 premium.

TABLE 1

PROVISION COMPARISONS

	1973	1984	1985
Limit of Liability (any one occurrence)	\$250,000	\$1,000,000	\$1,000,000
Group Deductible (any one occurrence)	5,000	25,000	35,000
Aggregate Deductible (stop-loss limit)	25,000	550,000	1,000,000

TABLE 3

**EXPENSES INCURRED
FROM JANUARY 1, 1973 TO DECEMBER 31, 1984
RE: ALL CLAIMS**

	To Claims	To Adjuster	To Legal & Experts
Paid by Insurer			
Dec. 31, 1984	435,913	16,122	224,528
Dec. 31, 1983	356,629	17,631	177,573
Paid by R.C.D.S.			
Dec. 31, 1984	990,250	576,792	571,901
Dec. 31, 1983	825,749	451,669	412,886
Total payments to date	\$1,426,163	\$592,914	\$796,429
Overall total - \$2,815,506			

TABLE 4

Year	Claims Filed	Claims Outstanding		
		Dec. 31/82	Dec. 31/83	Dec. 31/84
1973	29	0	0	0
1974	60	0	0	0
1975	43	0	0	0
1976	69	0	0	0
1977	80	5	5	5
1978	101	5	3	3
1979	119	9	5	4
1980	104	21	14	11
1981	140	48	27	15
1982	153	130	42	21
1983	148	—	116	61
1984	312	—	—	288*
Totals	1,358	218	212	408

*The significant increase in the number of claims reported in 1984, in comparison to previous years, is due to the compliance by members of the College with the request that our adjustors be informed of any occurrence or action of which they were aware which might reasonably be expected to be the basis of a claim or suit prior to the termination of the malpractice insurance in force in 1984. This request was made in anticipation of a change in carrier.

We sincerely thank our members for their co-operation.

ACKNOWLEDGEMENTS

I want to thank members of the Committee, and in particular Dr. Fox and the College staff, for the efficient administration of this plan which continues to admirably serve the profession and the public.

Inspection

REPORT OF THE INSPECTOR

Frank M. Greer



ILLEGAL PRACTICE OF DENTISTRY

During this past year, I have made several investigations into the illegal practice of dentistry. Whenever sufficient evidence became obtainable, a charge was laid. Some Crown Attorneys are so busy that they do not put high priority on this type of offense so I have submitted the evidence on guilty pleas in recent cases in the courts. I believe that the fines are not high and accordingly they do not prove to be a sufficient deterrent to others.

I have also co-operated with the Inspector for the Governing Board of Denture Therapists. We have exchanged information and as a result several denture therapists were brought before their Governing Board for fabricating dentures without supervision.

a) Toronto, Ontario

Mr. Morris Bernard, 365A Wilson Avenue, Downsview, Ontario, who owns and operates the Dynamic Dental Laboratory, was charged with the illegal practice of dentistry. He had made a complete set of dentures for a patient who later sent a letter of complaint to the College.

He appeared in Provincial Court, 1000 Finch Avenue, Toronto, Ontario, on August 22nd, 1984, and pleaded guilty to the charge. He appeared before Judge C.J. Morrison and was fined \$250.00.

b) Mississauga, Ontario

Mr. John Sachanski, 6A Elizabeth Street South, Port Credit, Ontario, who owns and operates the S&F Dental Laboratory, has been charged with the illegal practice of dentistry. He made a complete upper and a partial lower for a patient. This patient sent in a letter of complaint and as a result of the investigation a charge was laid.

He appeared in Peel Provincial Court on November 16th, 1984 and pleaded guilty. He was fined five hundred dollars.

JUDICIAL REVIEW

Seven cases referred to the Discipline Committee are pending Judicial Review on the basis of the legality of the charges.

INSPECTIONS

On the direction of the Executive Committee and Discipline Committee, the College staff has forty-six offices to be inspected at various times between now and the end of 1985. This number includes required repeat visits to some dental offices.

INFORMATION

Illegal signs and advertising constitute the majority of complaints that are brought to my attention. I am continually dealing with this type of complaint. I believe that the members of the College must adhere to the regulations related to these matters.

Complaints

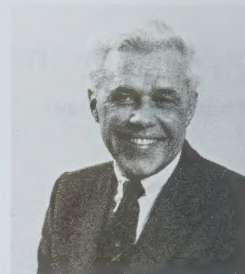
REPORT OF THE COMPLAINTS COMMITTEE

Chairman: J.K. Hunter, D.D.S.

Committee Members: W.H. Treleaven, D.D.S.

J.A. Monteith

Hygienist Observer: J.A. Pearce



COMMENTS

As of December 28th, 1984, 294 various types of written complaints or inquiries were received by the College. They pertained to unsatisfactory dentistry and excessive fees mainly, but covered such wide-ranging areas as physical abuse, sexual impropriety, extraction of wrong teeth, discount offers, performing without consent, inadequate treatment, overtreatment and discrepancies in claim forms – just to name a few.

The proportion of complaints appears to be higher in the larger metropolitan areas but this may well reflect a better “informed” public or less active local Mediations Committees in those areas.

The Complaints Committee held meetings at two-week intervals throughout the year, including the summer months. The experience gained over the past two years coupled with well prepared agenda books by the College staff enabled the Committee members to conduct productive meetings and for this all are to be commended.

Most complaints were satisfactorily resolved between the complainant(s) and the dentist(s) involved. The nature of complaints continued to follow the same pattern as before. Many were due to communication problems and some caused by expectations of patients far beyond the treatment capabilities of any dentist. “Failing to inform” continues to be a problem, particularly regarding periodontal treatment required and the discussion of long-range treatment plans. Some practitioners are performing “maintenance dentistry” and when the patient seeks care elsewhere due to changing employment or location, then the “new” dentist may inadvisedly make some derogatory remarks about the quality of their previous dentistry. Perhaps due to our economic climate, some complaints have been made about unnecessary or excessive treatment.

Complaints between dentists seem to have been fewer this year but may increase as the new graduates come “on stream”.

Of serious concern to the Committee is the number of complaint arising from insurance carriers. This Committee has recommended to Council that whenever a complaint is received from an insurance company their Dental Consultant be asked to appear before the Committee in order to discuss the matters raised.

The Committee expressed concern that some Dental Consultants may need up-dating in current dental techniques, materials, etc. in order to be as objective and well-informed as possible when reviewing claims.

AREAS OF CONCERN

a) Advertising

Advertising still continues to be of grave concern to the Committee but until new Regulations take effect, positive and concrete action

can only be taken when a flagrant violation has occurred. Apologies to the Committee and the local Dental Societies are abundant concerning advertising offences, and the profession as a whole has already been demeaned by some of this advertising prior to the complaint reaching the College.

b) Disputes between Practitioners

This is another on-going problem which could readily be resolved had legal expertise been utilized at the time of association with all details delineated in contract form. It is the position of the Committee that when the patients are used as “pawns” in disputes between practitioners there is a responsibility to intervene on behalf of the public.

c) Unsatisfactory Dentistry

Unsatisfactory dentistry and unrealistic expectations from patients continue to cause problems. Failure on the patient's part to shoulder his or her responsibility financially frequently results in the dentist initiating collection action which, in turn, has an equal and opposite reaction of a complaint being lodged with the College by the patient.

d) Fees

Creative billings and unreasonable fees still are a source of concern to the Committee. It is the Committee's recommendation that all patients be given a written treatment plan and estimate form prior to any major dental treatment being commenced so there are no misunderstandings. The Committee members also recommend that the practitioner, where possible, try to estimate the laboratory fees and ensure the patient understands that the fee quoted is an estimate only and could change as treatment progresses.

HEALTH DISCIPLINES BOARD

During 1984, 35 decisions of the Complaints Committee have been appealed to the Health Disciplines Board. Twenty-four of these decisions were confirmed by the Board, one was referred back to the Committee for further consideration, one appeal was withdrawn by a complainant and there were two referrals to the Discipline Committee. Seven cases are still pending.

Thoroughness in investigations and decisions leaves little reason for the complainant or member to appeal. While this is time-consuming both at staff and Committee levels, it assures both the members and/or the complainant that they have had a fair and impartial hearing. The contributions and presence of a lay member on this Committee is a further aid in keeping things in perspective.

ACKNOWLEDGEMENT

While it has been arduous being a member of the Complaints Committee, I have found it to be a worthwhile task in serving the public of Ontario and the dental profession. My sincerest thanks to Mr. James Monteith and Dr. W.H. "Trev" Treleven for their valuable assistance on the Committee. My thanks go to Dr. Don McFarlane and Mrs. Gladys Holder of the College staff who helped to ease the Committee's workload.

Discipline

REPORT OF THE DISCIPLINE COMMITTEE

Chairman: J.I.H. Fawcett, D.D.S.

Committee Members: K.S. Mathers, D.D.S.,
W.R. Hilliard, D.D.S., R.M. Matsui, D.D.S.,
L.V. Taylor, D.D.S., G. Nikiforuk, D.D.S.,
E. Swadron and Rev. R. Thomas



The year 1984 was a very busy year for the Discipline Committee of the Royal College of Dental Surgeons of Ontario.

Twenty-six hearings were conducted involving charges of alleged professional misconduct against twenty-seven members of the College. In addition, there was a hearing relative to allegations of incompetence against a member; there was a hearing relative to the re-instatement of a member; there were four sittings to listen to submissions relating to the adjournment or postponement or proceedings and two sittings to complete proceedings by the administering of reprimands.

Of these, nineteen were found guilty, five were determined to be not guilty, the charges against one member were dismissed as were the charges of incompetence against another member, and the charges were withdrawn in another matter. One guilty finding is under appeal.

The Committee has been greatly assisted by faculty members of the University of Toronto during 1984 in the provision of upgrading courses for members of the College who had failed to meet acceptable standards of practice in diagnosis, record keeping, treatment planning and radiology.

It has also been most encouraging to the Committee to have the co-operation of the Dean and faculty at the University of Western Ontario who have agreed to study the possibility of organizing further refresher and/or upgrading programs at their institution. This is a new opportunity that is currently being developed with the initiative of the Education Committee and staff members of the College and it is hoped that these additional programs will assist our members who require such courses in order to maintain acceptable standards of practice.

Over the years, our College and some of its members, have benefited from the courses provided for upgrading purposes by Dean Schwartz and members of the faculty at the University of Manitoba in Winnipeg. The R.C.D.S. is very appreciative for the efforts and co-operation of each of the three teaching institutions in recognizing the need to provide opportunities for members of the profession to refresh their knowledge, and to improve their clinical skills, in a continuing effort to show the public of Ontario that they are obtaining dental health care that is of the highest possible standard.

One of the primary objectives in structuring a penalty as a consequence of a discipline hearing is to provide for the rehabilitation of the dentist in a meaningful way so that he can return to his practice with renewed enthusiasm, confident that his knowledge and skills are up to standard.

This rehabilitation is a most important component of the penalty and can only be achieved with the support and co-operation of the

teaching institutions in recognizing that their responsibility does not end with the graduation of the dental student.

There have been the usual number of discipline hearings regarding the inadequacy of records and history taking. There has also been an increase in the number of infractions of the Regulations respecting advertising. The College and the profession are very much concerned about this apparent disregard of the rules and consider the matter a serious challenge to our ability to carry out our responsibilities as a self-regulating professional body.

One proceeding in particular emphasized the requirement for informed parental consent prior to the commencement of treatment. The practitioner involved was using a specific technique in the management of a difficult child patient and, although the technique had been discussed with the parents beforehand, the parents alleged that they did not fully understand the consequences. The practitioner was found guilty of professional misconduct in that he had failed to obtain the informed consent of the parents prior to performing treatment for a child in which a technique was used about which the parents were not adequately informed.

Another proceeding which came before the Committee in 1984 involved a practitioner who permitted a dentist and an auxiliary who were licenced in the United States, but not in Ontario, to perform services in his office on his patients. The dentist was found guilty of professional misconduct under the Regulations made under the Health Disciplines Act.

1.

A hearing was held from Monday, January 9 until and including Thursday, January 12, 1984 to hear into allegations of professional misconduct on the part of a member.

The Notice of Charge contained four allegations involving from five to seventeen patients. These pertained to the lack of adequate records; to the failure of taking any or adequate x-rays preliminary to treatment; to charging fees that were excessive or unreasonable and to performing unnecessary dental treatment on one or more patients.

The member was found not guilty to all charges.

2.

A hearing was held on January 23, 1984 to hear into allegations of professional misconduct on the part of:

Dr. David J. Wein
2102 Bridletowne Circle
Scarborough, Ontario

The Notice of Charge contained thirty-eight allegations involving twelve patients. Dr. Wein pleaded "Guilty" and was found "Guilty" to all charges. These pertained to twelve charges alleging failure to maintain any or adequate clinical records; twelve charges alleging the charging of fees that were excessive or unreasonable in relation to services performed; eight charges alleging the performing of unnecessary dental treatment upon a patient; two charges alleging the charging of fees for services not performed; two charges alleging the failure to treat or cause to be treated adequately or at all existing conditions and two charges of performing services in contravention to an undertaking imposed by the Discipline Committee in 1982.

The penalty assessed by the Committee following submissions by both counsel was:

1. That he be reprimanded and the fact of the reprimand recorded.
2. That his licence to practice be suspended for a period of twelve months retroactive to November 1, 1983 with six months of that to be remitted due to extenuating personal circumstances.
3. That his licence shall be restricted to practice in association with a member in good standing acceptable to the Registrar for a period of twelve months from the date of his commencing practice after his re-instatement.
4. That his licence shall be conditional on an inspection or inspections of his office practice at some time or times during a period of twelve months from the date of commencing practice after his re-instatement; and that his practice, in all aspects, shall meet the acceptable standards as set out in the Health Disciplines Act.
5. There will be publication in the usual course.

3.

A hearing was held on Thursday, February 16 and Wednesday, March 7, 1984 to hear an application by a member:

Dr. Max M. Balshin
330 Spadina Road, Apt. 905
Toronto, Ontario

for re-instatement subsequent to his licence having previously been revoked.

Subsequent to hearing representations made by both counsel and deliberating, the Committee rendered the following decision:

Dr. Balshin was granted the right to practice subject to the following conditions:

1. He is prohibited from prescribing any drug or drugs under Schedule G or Schedule N (i.e. any narcotic or controlled drug) for a period of eighteen months.
2. He agree to take a minimum of two continuing education courses in each year.
3. He agree to an inspection or inspections of his office at some time or times during a period of eighteen months from this date and that his practice would meet the acceptable standards of practice as set out in the Health Disciplines Act.

4.

A hearing was held on February 27 and 28, 1984 to hearing into allegations that a member has been guilty of professional misconduct in that his treatment of a patient and in particular the preparation and insertion of maxillary and mandibular bridges was inadequate and that they failed to meet the standards of practice of the profession.

The member was found not guilty.

5.

A hearing was held on Tuesday, March 6, 1984 to hear into four allegations of professional misconduct on the part of:

Dr. Brock H.M. Rondeau
201 - 648 Huron Street
London, Ontario

One of the four allegations forming part of the Notice of Charge was withdrawn by the College.

Dr. Rondeau pleaded "Guilty" and was found "Guilty" to an allegation that he failed to make and keep adequate clinical and financial records as it applied to three patients; to an allegation concerning the failure to treat or cause to be treated adequately or at all in relation to services rendered to five patients; to an allegation concerning the failure to take any or adequate x-rays with respect to, or preliminary to, treatment performed relative to three patients.

Following representations made by both counsel with respect to penalty, the Committee assessed the following:

1. That he be reprimanded and the fact of the reprimand be recorded.
2. That his licence to practice dentistry be suspended for a period of three months with the entire period of suspension being remitted conditional upon his agreeing to:
 - a) An inspection or inspections or his practice at some time or times during a period of eighteen months from this date and that his practice in all aspects shall meet the acceptable standards of practice as set out in the Health Disciplines Act,
 - b) that he agree to retreat those conditions which were found to be inadequate at no expense to the patients involved.
3. There shall be publication of this proceeding in the normal course.

6.

A hearing was held on April 2, 3, 4 and 6, 1984 to hear into five allegations of professional misconduct on the part of a member.

The member pleaded "Not Guilty" to all five allegations. He was found "Guilty" to the following two charges:

- a) That he had failed to perform any or an adequate examination of the patient to determine whether or not the patient was an appropriate candidate, preliminary to the treatment performed, namely, dental implant and
- b) that he had failed to diagnose adequately the probability of success of treatment performed, namely, a dental implant.

Subsequent to submissions being made by both counsel with respect to penalty the following penalty was assessed:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register.
2. That there be publication of this proceeding with the name and address of the member deleted.

7.

A hearing was held on Friday, April 13, 1984 to hear allegations of professional misconduct against:

Dr. Jean Bernard Larouche
2575 Innis Road
Ottawa, Ontario

One of the allegations was withdrawn by the College. Dr. Larouche pleaded "Guilty" and was found "Guilty" to the charge which alleged that he had used a method and/or procedures involving the

application of physical force to a minor patient's leg or other part of his body without the consent of the patient's parent(s).

After hearing the submissions by both counsel with respect to penalty it was the decision of the Committee that the following penalty be assessed:

1. That he be reprimanded and the fact of the reprimand not be recorded on the Register.
2. That there be publication of the proceedings in the normal course.

8.

A hearing was held on June 8, 1984 to consider five allegations of professional misconduct on the part of:

Dr. Arthur H. Rubinoff
2610 Eglinton Avenue West
Toronto, Ontario

One charge was dismissed. Two other charges were withdrawn by the College. Dr. Rubinoff pleaded guilty to two amended charges and was found guilty. The two allegations to which Dr. Rubinoff pleaded guilty were:

- a) that he permitted a person not licensed under Part II of the Act to assist him in the examination, diagnosis and treatment planning of orthodontic patients;
- b) that he failed to exercise generally accepted standards of practice and procedures in the performance of professional services in that he failed to ensure that a person not licensed under Part II of the Act did not perform acts in the practice of dentistry which that person was not authorized to perform by the Regulations.

Subsequent to the presentation of submissions by both counsel with respect to penalty the Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register.
2. That he be fined \$1,000.00 for payment into the Consolidated Revenue Fund.
3. That his licence to practice dentistry be suspended for a period of six months such suspension to commence on September 10, 1984.
4. That there be publication of this proceeding in the normal course.

9.

A hearing was held on June 18, 1984 to consider ten allegations of professional misconduct involving a member of the College. Six of the charges were withdrawn. The member pleaded "Guilty" and was found "Guilty" to four charges. These alleged that he failed to maintain adequate clinical and financial records with respect to nine patients; that he failed to take any or adequate x-rays relative to treatment performed for one or more of five patients; that he failed to treat or cause to be treated adequately or at all any or all of eight patients and that he submitted a claim to an insurance company wherein he charged fees for services not performed.

Subsequent to the hearing of submissions by both counsel with respect to penalty the Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register.
2. That his licence to practice dentistry be suspended for a period of

twelve months such suspension to commence on June 18, 1986.

Two months of such suspension were remitted on the basis of the extenuating circumstances surrounding these matters.

A further ten months of such suspension were remitted based upon the following conditions.

- a) He shall agree, in writing, to permit a minimum of twelve inspections of his practice by a representative or representatives of this College at such time or times as may be determined by the College over a twenty-four month period commencing from this date, June 18, 1984. In addition, he shall provide copies to the representatives of the College, at the time of the inspections, of all claims submitted to third party carriers on behalf of his patients during this twenty-four month period.
 - b) He shall agree, in writing, to provide evidence to the College of satisfactory completion or attendance at three continuing education courses, lectures or seminars in each twelve month period from this date, said continuing education programs are to be approved by this College beforehand.
 - c) He shall repay his patient _____ the full amount of \$1,670.00 on or before December 31, 1985.
 - d) He shall agree to seek and obtain psychological or psychiatric treatment immediately and continue with such treatment until such time as a report acceptable to the College is provided by him indicating such treatment is no longer required. In addition, he shall provide, at his own expense, periodic progress reports regarding such treatment.
3. There shall be publication of this proceeding in the normal course with the name and address of the member deleted.

10.

A hearing of the Discipline Committee was held on June 20 and 21, 1984 to hear into two allegations of professional misconduct against a member.

The charges alleged that the member had failed to maintain the standards of practice of the profession with respect to his treatment of one of his patients in that he failed to diagnose and/or treat or cause to be treated, adequately or at all the patient's general periodontal condition, and that he failed to maintain and keep any or adequate clinical and financial records respecting one of his patients.

The member pleaded "Not Guilty" to both charges and was found "Guilty".

Subsequent to the hearing of submissions by both counsel with respect to penalty, the Committee assessed the following:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register.
2. That his licence to practice dentistry in Ontario shall be suspended for a period of two months.

The entire period of the suspension shall be remitted based upon the following conditions:

- a) That he shall agree to two inspections of his office by representatives of the College within a twelve month period from the date of the hearing. It is expected that his practice in all aspects shall meet the acceptable standards of practice as set out in the Health Disciplines Act, 1980 and in particular that he present evidence to the effect that appropriate referrals to specialists of his patients is being carried out in a routine and regular manner. In addition, that his recall system shall be carried out in a well-organized, documented manner.
3. There shall be publication of this proceeding in the normal course

with the name and address of the member deleted.

11.

A hearing of the Discipline Committee was held on July 17, 1984 to consider five allegations of professional misconduct on the part of:

Dr. Gerald J. Gray
134 Lakeshore Road East
Mississauga, Ontario

Two of the charges were withdrawn. Dr. Gray pleaded "Guilty" to two of the charges and "Not Guilty" to the third charge. He was found "Guilty" to the allegation that he failed to keep adequate clinical records respecting one or more of fourteen patients; that he failed to maintain the standards of practice of the profession in that he failed to treat adequately or at all one of his patients; and that he failed to take any or adequate x-rays prior to treatment rendered four of his patients.

Subsequent to hearing the submissions presented by both counsel with respect to penalty, the Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded.
2. That his licence to practice dentistry in Ontario shall be suspended for a period of twelve months, such suspension to commence on August 20, 1984.

Two months of such suspension shall be remitted based upon the following:

- a) He shall agree, in writing, to permit four inspections of his practice during a period of twenty-four months following the completion of both prescribed upgrading courses and that his practice shall in all aspects meet the acceptable standards as set out in the Health Disciplines Act.

Six additional months of the suspension shall be remitted based upon his successful completion of upgrading participation training programs in each of the following courses of study in the areas of record keeping, oral diagnosis, treatment planning and radiographic interpretation:

- a) The University of Toronto, Faculty of Dentistry course commencing August 20, 1984.
- b) The University of Manitoba, Faculty of Dentistry course in Winnipeg as soon as available.

A further two months of his suspension shall be remitted based upon his submitting to the College of a proposal indicating the specific measures that he will be implementing in order to upgrade the standards of his practice in relation to the maintenance of adequate clinical records and medical histories, oral diagnosis, treatment planning and radiographic interpretation. Such proposal is to be submitted for approval by the Registrar of this College prior to December 31, 1984 and following the successful completion of the two prescribed courses.

3. The renewal of his licence in 1985 shall be conditional upon his successful completion of the aforesaid courses. If, for some reason, the prescribed courses cannot be completed in 1984, the requirements shall be fulfilled in 1985 and the renewal of his licence in 1986 shall be conditional upon successful completion.
4. There shall be publication of this proceeding in the normal course.

12.

A hearing of the Discipline Committee was held on July 19, 1984 to consider an allegation that a member had submitted a claim with respect to a patient wherein he charged fees that were excessive or

unreasonable in relation to services allegedly performed.

The member pleaded "Not Guilty" and was found "Not Guilty".

13.

A hearing of the Discipline Committee was held on July 23, 1984 to consider three allegations of professional misconduct on the part of a member of the College.

The member pleaded "Guilty" and was found "Guilty" to all three charges.

The charges related to his failure to keep adequate clinical and medical records respecting one or more of eleven patients; his failure to maintain the standards of practice of the profession in that he failed to treat adequately or at all one or more of five patients, and that he failed to take any or adequate x-rays prior to treatment rendered one or more of three patients.

Following submissions by counsel for the College and by the member (who was unrepresented) with respect to penalty, the Discipline Committee assessed the following:

1. That he be reprimanded and the fact of the reprimand be recorded.
2. That his license to practice dentistry in Ontario be suspended for a period of three months, such suspension to begin on August 20, 1984.

Two months of such suspension shall be remitted based upon his agreement to the following conditions:

- a) He shall agree, in writing, to permit four inspections of his practice by a representatives or representatives of this College during a period of twenty-four months following completion of a prescribed upgrading course and that his practice shall in all aspects meet the acceptable standards as set out in the Health Disciplines Act.
 - b) That he successfully complete an upgrading participation course in the areas of record keeping, oral diagnosis, treatment planning, radiographic technique and interpretation. Such course shall be acceptable to and approved by the Registrar of the College.
3. There shall be publication of this proceeding in the normal course with the name and address of the member deleted.

14.

A hearing of the Discipline Committee was held on July 26, 1984 to consider four allegations of professional misconduct on the part of a member.

One charge was withdrawn. The member pleaded "Guilty" and was found "Guilty" to allegations that he failed to maintain any or adequate clinical records respecting one or more of thirty patients; that he submitted a claim or claims to an insurance company wherein he charged fees that were excessive and/or unreasonable in relation to services performed respecting one or more of thirty-one patients and that he submitted misleading or inaccurate claims or charges to an insurance company respecting services rendered to one or more of thirty-one patients.

Subsequent to the hearing of submissions by both counsel with respect to penalty it was the decision of the Discipline Committee that the following penalty be assessed:

1. That he be reprimanded and the fact of the reprimand be recorded on the Registrar.
2. That his licence to practice dentistry in Ontario be suspended for a period of twelve months, the first month of such suspension to commence on September 15, 1984, the second month of such

suspension to commence on November 15, 1984.

Three months of such suspension shall be remitted on the basis of extenuating circumstances and personal suffering associated with these matters.

A further three months of such suspension shall be remitted on the basis of the member making restitution to the insurance company involved to the extent of negotiated settlement acceptable to the parties involved and if unable to reach such agreement, the members of the panel present today shall sit and arbitrate the matter.

A further three months of such suspension shall be remitted based upon his agreement in writing to permit four inspections of his office by a representative of representatives of this College at some time or times as may be determined by the College over a twenty-four month period from this date, July 26, 1984. In addition, he shall provide copies to the inspectors at the time of the inspection of his office, of all claims submitted by him to third party carriers on behalf of his patients during this twenty-four month period.

In addition, it is expected that his practice at all times shall meet the acceptable standards as set out in the Health Disciplines Act. If at any time during this period, it is determined by the inspectors that an upgrading course in clinical charting and record keeping would be indicated and upon recommendation of that fact and following a report to the Registrar that he had failed to comply with such recommendation, the period of three months suspension shall come into effect.

A further one month of such suspension shall be remitted based upon the assistance and co-operation given by the member throughout the period of this entire proceeding.

3. He shall be fined an amount of \$2,000.00 which amount shall be paid to the Treasurer of Ontario for payment into the Consolidated Revenue Fund by September 1, 1984.
4. There shall be publication of this proceeding in the normal course with the name and address of the member deleted.

15.

A hearing of the Discipline Committee was held on September 5, 6 and 7, 1984 to consider allegations of incompetence on the part of a member with respect to two patients.

The charges were dismissed.

16.

A hearing was held on September 12, 1984 to consider two allegations of professional misconduct on the part of a member.

The member pleaded "Guilty" and was found "Guilty" to allegations that he permitted, counselled or assisted persons not licenced under Part II of the Act to engage in the practice of dentistry, contrary to the provisions of the Act.

After hearing submissions by both counsel with respect to penalty, the Committee assessed the following penalty:

1. That the member be reprimanded and the fact of the reprimand be recorded on the Register.
2. That his licence to practice dentistry in Ontario be suspended for three months.

The entire period of suspension shall be remitted based upon his agreement to the following conditions:

- a) He shall agree, in writing, to permit an inspection or inspections of his office by representatives of the College at a time or times as

may be determined by the College during a period of eighteen months from this date and that his practice in all aspects shall meet acceptable standards as set out in the Health Disciplines Act.

- b) That he agree, in writing, not to allow unauthorized personnel to engage in the practice of dentistry provided in the Act.
3. That he be fined \$1,000.00 for payment into Consolidated Revenue Fund.
4. That this proceeding shall be published with his name and address deleted.

17.

A hearing was held September 18, 1984 to consider ten allegations of professional misconduct on the part of:

Dr. Otto Spork
1575 Clarkson Road N.
Mississauga, Ontario

Dr. Spork pleaded "Guilty" and was found "Guilty" to allegations that he failed to maintain any or adequate clinical records with respect to twelve patients; that the endodontic treatment rendered one of his patients was inadequate; to four charges that he failed to take any or adequate x-rays with respect to treatment rendered specific patients; to three charges that he failed to treat or cause to be treated adequately or at all certain patients; and to two charges wherein it was alleged that he charged fees that were excessive or unreasonable in relation to services performed.

Subsequent to hearing submissions by both counsel with respect to penalty, the Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded.
2. That his licence to practice dentistry in Ontario shall be suspended for a period of five months.

Two months of such suspension shall be remitted based upon his successful completion of the following upgrading participation courses:

- a) The University of Western Ontario, Faculty of Dentistry continuing education programs in endodontics; Endodontics I and Endodontics II which are being provided in October, November and December, 1984.
- b) A participation course in oral diagnosis, record keeping, treatment planning, radiographic technique and interpretation to be offered by the Faculty of Dentistry at the University of Toronto in December, 1984.

A further two months of such suspension shall be remitted based upon his agreement, in writing, to permit an inspection or inspections of his practice at such time or times as may be determined by the College during the period of eighteen months from January 1, 1985 and following completion of prescribed upgrading courses and that his practice in all aspects shall meet the acceptable standards as set out in the Health Disciplines Act.

The balance of his suspension shall commence on February 1, 1985.

3. There shall be publication of this proceeding in the normal course.

18.

A hearing was held on September 24, 1984 to consider four allegations of professional misconduct on the part of:

Dr. Walter W. Pressey
1702 - 2300 Yonge Street
Toronto, Ontario

Dr. Pressey pleaded "Not Guilty" and was found "Guilty" to allegations that he:

- a) Failed to provide within a reasonable time a report requested by one of his patients and/or her authorized agent in respect of an examination or treatment performed by him on the patient.
- b) That he failed to maintain and keep any or adequate clinical and financial records respecting one of his patients.
- c) That he charged fees for services not performed respecting one of his patients.
- d) That he charged fees that were excessive and/or unreasonable in relation to the services performed on one of his patients.

Following deliberation and examination of the facts presented by both counsel with respect to penalty, the Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register of the College.
2. That his licence to practice dentistry in Ontario be suspended for a period of three months.

One month of such suspension shall be remitted based upon his agreement, in writing, to permit three inspections of his office by a representative or representatives of this College at some time or times during a period of eighteen months following the completion of the prescribed upgrading course and further, that his practice in all aspects shall meet the acceptable standards of practice as set out in the Health Disciplines Act, 1980.

A further one month of such suspension shall be remitted based upon his successful completion of an upgrading course in record keeping, oral diagnosis and treatment planning. Such prescribed course shall be a participation course suited to the specifics outlined above and shall be acceptable to and approved by the Registrar of this College and offered by either the Faculty of Dentistry of the University of Toronto or the Faculty of Dentistry of the University of Manitoba.

The balance of the suspension, being one month, shall commence on December 1, 1984.

3. He shall be fined \$500.00 for payment into the Consolidated Revenue Fund.
4. There shall be publication of this proceeding in the normal course.

19.

A hearing was held on September 25, 1984 to hear into an allegation of professional misconduct on the part of a member.

The member pleaded "Guilty" and was found "Guilty" to the allegation that he published, displayed, distributed or permitted, directly or indirectly, the publication, display, distribution or use of an advertisement related to the practice of dentistry other than permitted by the Act.

After hearing submissions by both counsel with respect to penalty, the Committee assessed the following penalty:

1. That the member be reprimanded and the fact of the reprimand not be recorded on the Register.
2. That there shall be publication of this proceeding with the name and address of the member deleted.

20.

A hearing was held on September 26, 1984 to consider one allegation of professional misconduct on the part of a member.

The charge that the member published, displayed, distributed or permitted, directly or indirectly, the publication, display, distribution or use of an advertisement related to the practice of dentistry other than permitted by the Act was dismissed.

21.

A hearing of the Discipline Committee was held on October 2, 1984 to consider two allegations of professional misconduct on the part of:

Dr. Kai Ming Kan
2nd Floor, 487 Dundas St. W.
Toronto, Ontario

One charge was withdrawn by the College. Dr. Kan pleaded "Guilty" and was found "Guilty" to the charge that he failed to treat or cause to be treated, adequately or at all, lesions on eight teeth for one of his patients.

Subsequent to submissions by both counsel with respect to penalty the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand recorded on the Register.
2. That his licence to practice dentistry in Ontario be suspended for a period of three months.

The entire period of suspension shall be remitted based upon his agreement to the following conditions:

- a) That he successfully complete an upgrading course in dentistry for children. Such prescribed course shall be a university based participation course in diagnosis, treatment planning, patient management and operative procedures and shall be acceptable to and approved by the Registrar of the College.

It is intended that the course shall be at his expense and must be completed within eight months of the hearing date.

- b) That he agree, in writing, to permit two inspections of his office by a representative of the College at some time or times during a period of twelve months following the successful completion of the prescribed upgrading course and further that his practice in all aspects shall meet acceptable standards of practice as set out in the Health Disciplines Act.
3. There shall be publication of this proceeding in the normal course.

22.

There was a hearing on October 25, 1984 of the Discipline Committee to consider sixty allegations of professional misconduct on the part of:

Dr. Lawrence W. Marquis
37 Heath St. East
Toronto, Ontario

Dr. Marquis pleaded "Guilty" and was found "Guilty" to twenty-three allegations that he failed to maintain any or adequate clinical records; to nine allegations that he submitted claims to carriers that were excessive or unreasonable in relation to services allegedly performed; to eight allegations that he failed to take any or adequate x-rays preliminary to treatment performed; to thirteen allegations that he charged fees to patients that were excessive or unreasonable in relation to services allegedly performed and to seven allegations that he failed to treat or cause to be treated adequately or at all services required by his patients.

Subsequent to the hearing of submissions by Dr. Marquis on his behalf and counsel for the College with respect to penalty, the Committee assessed the following:

-
1. That he be reprimanded and the fact of the reprimand recorded on the Registrar.
 2. That his licence to practice dentistry in Ontario be suspended for a period of twelve months.

The entire period of suspension shall be remitted based upon the following conditions:

- a) That he successfully complete a university-based upgrading participation course in oral diagnosis, record keeping, treatment planning, radiographic technique and interpretation. Such course shall be completed within six months of this date, and shall be acceptable to and approved by the Registrar of the College and shall be at his own expense.
 - b) That he shall agree, in writing, to permit four inspections of his practice by a representative or representatives of this College at such time or times as may be determined by the College during the period of twenty-four months following successful completion of the prescribed upgrading course and that his practice in all aspects shall meet the acceptable standards of practice as set out in the Health Disciplines Act.
 - c) That he agree, in writing, to attend two continuing education programs of his choice during each of the next two year period.
3. That he shall be fined \$1,000.00 for payment into the Consolidated Revenue Fund.
 4. That there shall be publication of this proceeding in the normal course.

Other Reports

REPORT OF THE LIEUTENANT GOVERNOR IN COUNCIL REPRESENTATIVES TO THE R.C.D.S.

Mr. J.A. Monteith, Rev. R. Thomas,
Mrs. E. Swadron

The R.C.D.S. is entering its 117th year of service to the Province of Ontario. Over these years, not only has it served to maintain the standards of dentistry, but has led the profession to the position of a world class leader. These achievements are the result of dedicated members of years gone by, laying the foundation for the profession of today. The comfort zone now enjoyed reveals that selfless commitment to excellence they had, and their dream to build a solid future for those who would follow. I somehow doubt that the question was ever asked, "Why should I have to invest in someone else's future?" If those who went before us would provide such a legacy, ought we to do less? I'm sure we all agree that this generation has a responsibility to build for the future.

In 1958, the R.C.D.S. made a major capital investment in the property which now houses the College at 230 St. George Street in Toronto. This property today is valued at almost ten times its purchase price. Our hindsight would tell us the R.C.D.S. made a wise decision in 1958. It is obvious they planned for the future. At the time of purchase, this once very comfortable single family tudor became home for the R.C.D.S. and the O.D.A. (that was before we knew much about "conflicts of interest").

In 1956, the staff of the College consisted of one dentist and one secretary. By 1965, the staff grew with the addition of three part-time clerks and one half-time inspector.

The introduction of the Health Disciplines Act in 1974 brought an increase of another dentist, another secretary, a full-time inspector, one receptionist and a bookkeeper.

The year 1979 saw an increase to three dentists, five secretaries, one inspector, one receptionist, a clerk and a bookkeeper. In 1982, the staff further increased by the addition of a dental hygienist and another secretary.

Needless to say, the increase in staff brought more furniture, office equipment and file cabinets. This has forced many renovations to this 8,890 square foot building, of which only 5,537 square feet is functional floor space.

I might add that, at this time, a housekeeper, who also assumes the role of part-time chef, office help and security guard, occupies a 930 square foot, one bedroom apartment on the third floor.

The suite boasts a sloped ceiling that would restrict the functional activities of a six foot person to the centre floor area. It is evident that not only has the building reached its limits, the parking also reveals the growth the years have brought.

The 1984 staff strength grew to a total of fifteen, and what about the parking lot, you ask? On more than one occasion, staff have had to interrupt a meeting to ask me for my car keys so they may let someone else out.

A consultant's report in 1983 demonstrates how these facilities could be expanded by an additional 2,134 square feet to accommodate thirty staff members. Please forgive me, but the logic of how a 50% increase in floor space will accommodate a 100% increase in staff escapes me.

Let us look for a moment at how this added floor space would be achieved:

- a) The excavation of a portion of the basement at a formidable cost would gain a total of 384 square feet.
- b) Move the microfilm and archive files, which are often used for reference, to some undetermined location in the city.
- c) Move all Professional Liability Insurance administration off the premises to some undetermined location in the city.
- d) Move the housekeeper (and security) off the premises and use the 930 square foot apartment for office space (please watch your head).
- e) Close in the roof deck at the rear of the third floor (now, you will have to go through the bathroom to get there, if you don't mind).

It is possible to do almost anything, but the logistics of trying to run the affairs of the College in this piece-meal, patchwork arrangement, which is temporary, at best, is rivalled only by that of attending a Blue Jays ball game at CNE Stadium during Exhibition week. To ask the College staff to endure this throughout the year is not building for the future.

If you subscribe to John Naisbitt's forecast of the future in his national best seller, "Megatrends", you believe we are rapidly moving into a high-tech, high-touch society. Whether he is right or wrong, we can be sure we are living in an age of high information. A more informed public will impact on the demands of the profession and, not least, on the workload of the R.C.D.S.

There is talk of additional Council members to help carry the heavy load of Council work. All of us are aware of the health profession's legislative review. This has already created no small addition to the workload of the College. The changes that may occur as a result of this review will be certain to create more work for the staff, not less.

The existing facilities have served the profession well because a generation dared to build for the future. Can this generation expect to do less?

In my view, the profession would be very short-sighted and irresponsible if it did not act when action is so clearly required. Much larger facilities for the R.C.D.S. are a must. Solomon of old said, "... it is a wise man who leaves an inheritance to his children's children...".

I leave you with the advice King David gave to Solomon when he was faced with the task of building the temple: "... BE STRONG... TAKE CHARGE... AND DO IT...".

Prepared by
Rev. R.P. Thomas

REPORT OF THE AD HOC COMMITTEE ON MANPOWER

Chairman: G.E. Pitkin, D.D.S.

Committee Members: J.K. Hunter, D.D.S.,
K.S.M. Mathers, D.D.S., E. Swadron, J.A. Pearce

The Ad Hoc Committee on Manpower continued to study the problems of oversupply of dental service providers and the under utilization of our services during our 1984 deliberations.

The Committee was informed that the first year enrolments at both Ontario Dental Faculties were reduced this year. The Univer-

sity of Toronto accepted 96 students down from 104 in 1983 and the University of Western Ontario welcomed 40 candidates as opposed to 56 the year before.

The 1983 Manpower Survey indicated that dentists in practice ten years or less continue generally to be less busy than they would like. Next year, the Committee intends to random sample our members to determine if they are accepting new patients.

Dr. Don Lewis attended one of our meetings in 1984 and told us that, although no thorough systematic follow-up had been done at this time to his study, his predicted increases in dentist/population ratio have been quite accurate. However, his predictions regarding dental hygienist ratios have not yet materialized. Dr. Lewis has offered to assist the College in designing a questionnaire for our annual licence application which would allow for a regular review of Manpower issues.

This Committee must continue to strive for the collection of factual data supporting the existence of too many dental care providers or have its concern fall into the rumour and anecdote mill. We understand that studies regarding the effects of fluoridation on Dental Manpower rates throughout the world are on-going at this time and we hope to monitor the conclusions reached by these studies for verification of our concerns.

So many of us are affected by the problems studied by this Committee and the work of this Committee has always been and continued to be important but very frustrating.

REPORT OF THE ANAESTHESIA AND SEDATION COMMITTEE

Chairman: G.E. Pitkin, D.D.S.

Committee Members: G. Beber, D.D.S.,
H. Dexter, D.D.S., V. Drenfeld, D.D.S.,
R. Locke, D.D.S., R.M. Matsui, D.D.S.,
I. Schofield, D.D.S., L.V. Taylor, D.D.S.

The Anaesthesia and Sedation Committee's activities this past year were chiefly concerned with the collecting and collating of specific reports from those utilizing general anesthesia and intravenous techniques for their patients. It is a pleasure to report that by far the vast majority of practitioners in the province responded to our survey and their co-operation has been noted on their permanent College records. It is also noteworthy that the reports analyzed for the general anaesthesia providers were exemplary. Very few concerns were forthcoming from our study.

However, in studying the responses from the intravenous sedation users, a large number of problems were evident. Quite a number of people utilizing this modality did *not* meet the requirements of the Guidelines. The deficiencies noted were the use of narcotics and Valium in combination, the lack of a Registered Nurse as part of the team, the use of Valium and nitrous oxide in combination, and some practitioners had dubious training qualifications. These individuals have had their deficiencies brought to their attention and steps have been taken to assist them in meeting the current guidelines.

Of interest, the Committee was informed that there has been a somewhat alarming rise in the number of phlebitis cases, as a result

of intravenous sedation usage, being reported to the malpractice insurance adjusters. It is important that this risk be included in any prior consent discussion with your patients.

Liaison has been established between our Committee and our Ontario Dental Association counterpart Committee under the very capable Chairmanship of Dr. Steven Small. It is hoped that this communication link will prove beneficial to all practitioners in the province as well as provide security for the public.

The Committee chose not to address the subject of delineating the make-up of an acceptable emergency dental office kit at this time but it is my understanding that at least one of the Committee members intends to re-introduce the matter next year. The Committee has also indicated their attention to include a statement on the use of intramuscular injection techniques when the guidelines are next reviewed.

AD HOC COMMITTEE ON DENTAL IMPLANTS

Chairman: G.E. Pitkin, D.D.S.

Committee Members: J. Cox, D.D.S., J. Druck, D.D.S.,
L. Pedlar, D.D.S., P. Watson, D.D.S.

By the time you read this report, this very busy Committee will have concluded its' mandate for the present and you will all have received a copy of the Guidelines for the Utilization of Dental Implants.

This technique modality appears to be in its' infancy right now and like all infants it is suffering from growing pains and learning is often by trial and error. It is hoped that by using the guidelines judiciously and with prudence, the public well-being and confidence in the dental profession will be safeguarded. It is up to us all to make sure that this trust is never compromised.

The profession owes a great deal to the fine members of this Committee for their responsible dispatch of their abilities and concerns in formulating our recommendations and Guidelines. Without their dedication and professionalism, the task would have been impossible. The Chairman found his association with them, although brief, of the highest pleasure. My thanks to them.

DENTISTRY REVIEW COMMITTEE

Chairman: E.J. Sonley D.D.S.

J. Becker, D.D.S., B. Donaldson, T.J. Jasper, D.D.S.,
C. Young

This Committee only functions when the General Manager of O.H.I.P. refers a matter to it regarding a billing irregularity submitted to O.H.I.P. by a dentist.

I am pleased to report that no referrals have been made to the Committee in 1984.

The last referral to the Committee occurred in 1982 and the decision made by the Committee at that time is under appeal to the Health Services Appeal Board. It is anticipated that the appeal will be heard in 1985.

NATIONAL DENTAL EXAMINING BOARD

R.E. Jordon D.D.S.

EXAMINATIONS

WRITTEN

Proposal for Continuing Education Program

The Board agreed to support the principle of a self-assessment program and, in conjunction with the Licensing Authorities, the CDA and the Association of Canadian Faculties of Dentistry (ACFD) will be exploring the development of such a voluntary and confidential program at a workshop to be held late in 1985.

PRECLINICAL AND CLINICAL

The Board decided to hold a seminar/workshop to review its examination process in more depth than is done on an annual basis. This seminar will be held on May 6 & 7, 1985, in Ottawa.

LEGAL

The Board's legal counsel, in addressing The Board, stated that an increase in litigation could be expected in the future. More people are aware of their "rights" which are loosely defined in the Charter, therefore making it very difficult for appeals to be processed.

The Board still has two active cases with the Human Rights Commission of Ontario and The Board's position is that the cases were filed under the wrong jurisdiction. The Board, as a federal agency, should be challenged at the federal level only.

The decision of the Human Rights Commission of Ontario is expected at the end of December 1984. Should the decision be such that it would require The Board to defend itself at the provincial level, legal advice is to challenge this decision in a court of appeal. The Board considers that the Human Rights cases are precedent-setting in the same manner as the Footman case was in the Federal Court of Appeal in 1983.

REQUEST FROM CDHA

The Board had received a request from the Canadian Dental Hygienists' Association to explore the possibility of establishing a national certifying examination for dental hygienists. Since The Board has no jurisdiction in the area of hygienists and since the legal and financial implications of any action would be complicated and considerable, The Board, although sympathetic, decided that it was unable to pursue the matter at this time.

The Board encouraged the CDHA to work with the CDA Council on Education and Accreditation in order to develop a competency profile of a dental hygienist for the purpose of portability.

CDA COUNCIL ON EDUCATION AND ACCREDITATION

SUB-COMMITTEE ON PRE-LICENSURE

The Board voted to contribute \$5,000, to the proposed conference on pre-licensure, however, The Board did not wish this contribution to be interpreted as an endorsement of the concept of pre-licensure at this time.

NDEB ACCREDITATION COMMITTEE

The two issues pertaining to survey reports still of concern to The Board and not dealt with by the CDA Council on Education and

Accreditation were deemed to be the following:

- that members of the survey team have an opportunity to see the final report prior to its submission to Council;
- that the chairman of the survey team present the report to the appropriate committee of Council.

It was stated by the Chairman of Council that the reason for this was budgetary constraints.

DIRECTOR OF ACCREDITATION

The Board had invited the CDA Director of Accreditation to address the Annual Meeting. This address was well received, particularly in regard to the following:

- the accreditation process being a partnership between the ACFD, CDA and NDEB;
- NDEB Accreditation study, completed the previous year, having considerable value and impact in improving the process;
- pilot project on a forthcoming undergraduate dental survey: evaluating the clinical performance of students in an attempt to establish a dimension of competence; this as a result of a NDEB initiative;
- the NDEB's significant contribution to the costs of accreditation.

OFFICERS OF THE BOARD FOR 1985

President: Dr. R.B. Gilliland

Vice-president: Dr. H.M. Dick

Past-president: Dr. W.J. O'Driscoll

Registrar: Dr. G. Kravis

Executive Secretary/Treasurer: Mrs. F. Dawes

CERTIFICATE OF MERIT

The President presented a certificate of merit to Dr. K.C. Bentley who was attending his last Annual Meeting.

REPORT OF THE DENTAL HYGIENIST OBSERVERS

Mrs. Lynda Mickelson, Mrs. Jocelyn Pearce

We have now completed our second term as the dental hygiene official observers on the R.C.D.S. Council. During the past four years, we have participated as full voting members on the non-statutory committees of the College (Education, Finance & Property, Legal & Legislation, Professional Liability Insurance, O.D.H.A./O.D.A./R.C.D.S. Liaison and special ad hoc committees) and as non-voting but active members on the statutory committees (Executive, Registration, Complaints and Discipline, whenever a dental hygienist or hygiene matters have been involved).

Over the past several years, there has been the hope that the "official observer" status of the dental hygienist representatives on the R.C.D.S. Council would change to that of a full voting member. To accomplish this, it requires the opening of the Health Disciplines Act which involves obtaining approval of the legislature.

Since the Health Disciplines Act is now under review by the Legislative Review Committee, it is anticipated that any

amendments will not take place until after the Committee has submitted its final report.

Part of the review process involved the submission of briefs by all interested health professions. As a result of submissions pertaining to dental hygienists, representatives of the R.C.D.S. and the Ontario Dental Hygienists' Association (O.D.H.A.) met during 1984 on several occasions in an attempt to reach a mutually agreeable mechanism for the continued regulation of dental hygienists within the R.C.D.S.

The issues discussed were:

1. Representatives on the Council of the College and committees, i.e. numbers and voting status;
2. Definition of supervision;
3. Delegated duties of dental hygienists; and
4. A method of resolving future issues where the interests of dental hygienists are in conflict with those of the dentists on R.C.D.S. Council.

A proposal containing these items was drafted and approved in part by the R.C.D.S. Council but was not entirely acceptable to the Board of Directors of the O.D.H.A. and they requested further changes. As a result, a special meeting of the R.C.D.S. Council has been scheduled for mid-March 1985 in order to discuss the future regulation of dental hygienists.

Accordingly, the status of the dental hygiene observers will remain as it has been in the past with non-voting membership on the statutory committees and Council and voting membership on the standing committees until the legislative review has been completed.

COMMENT: The official observers feel that the decisions being made now for the future regulation of dental hygiene will have great impact on the delivery of dental care to the public of Ontario. Because dentists and hygienists work closely together in a practical setting, we believe the same could apply to our Regulations. We feel that hygienists do have a valuable contribution to make in the administrative functions of the dental profession just as they make a valuable contribution in the delivery of dental care in the province.

REPORT ON THE AD HOC COMMITTEE ON REDISTRIBUTION

Chairman: W.H. Treleaven, D.D.S.

Committee Members: R.M. Matsui, D.D.S.,
L.V. Taylor, D.D.S., Mrs. E. Swadron

This Committee was established to study the existing boundaries of the electoral districts of the College and related to this representation on the Council of the College.

Various proposals have been circulated to the local dental societies for their consideration and comments. These comments will be studied by the Committee.

The object of the study on redistribution is to determine if improved communication between the members of Council and the dentists in the district they represent, can be effected.

REPORT OF THE AD HOC QUALITY ASSURANCE COMMITTEE

Chairman: W.H. Treleaven, D.D.S.

Committee Members: G. Nikiforuk, D.D.S.,
R.M. Matsui, D.D.S., K.S.M. Mathers, D.D.S.,
J.I.H. Fawcett, D.D.S., R. Thomas

The Committee met three times during 1984. The last meeting was held on December 17th, 1984.

All aspects of the subject of "Quality Assurance" were discussed in depth. A report was prepared containing a list of various options with related points in favour and opposed.

After the newly elected members of Council have had an opportunity to review the report (actually a working paper), it will be sent to all local dental societies and other groups for their input. The Committee wants the views of the dentists of the province on this important subject before any action is considered.

REPORT OF THE AD HOC COMMITTEE ON DELIVERY OF DENTAL CARE TO PATIENTS IN INSTITUTIONS, PUBLIC HEALTH AND COLLECTIVE LIVING CENTRES

Chairman: K.S.M. Mathers, D.D.S.

Committee Members: J.I.H. Fawcett, D.D.S.,
J.A. Monteith, G. Nikiforuk, D.D.S., G.E. Pitkin, D.D.S.,
L.V. Taylor, D.D.S., L.L. Mickelson, J.A. Pearce

This Committee was previously named the *Supervision Committee*, whose primary task was to develop guidelines for defining supervision with regard to dental hygienists in all practice settings in the province of Ontario. However, Council, at its November 1983 meeting renamed the Committee to the "Ad Hoc Committee on Delivery of Dental Care to Patients in Institutions, Public Health and Collective Living Centres". Part of the renamed Committee's direction is now to approach government on a direct basis to request information on their level of involvement, regarding support and funding for providing dental services in institutions, public health and collective living centres.

The Ontario Dental Association responded to a request from the Committee regarding the O.D.A.'s Special Patient program. Dr. J.W. Shosenberg, Chairman of the Special Patient Subcommittee supplied the Ad Hoc Committee with an update from all the local dental societies throughout the Province. As well, the September issue of the *O.D.A. Action News* encouraged all component societies "to help bring a worthwhile service to a deserving sector of the public". The Ad Hoc Committee will continue to monitor the O.D.A.'s program.

It is interesting to note that in the second Submission to The Health Professions Legislation Review by The Ontario Dental Hygienists' Association, the following comments were made:

- The dental lobby has rendered the Supervision Committee of the R.C.D.S. ineffective.

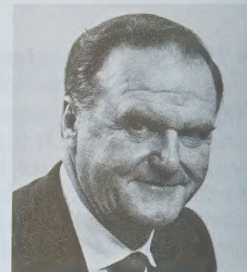
- The objectives have been reorganized to focus on establishing dental needs of patients within *collective living centres*.

The issue of supervision of dental hygienists has recently been addressed by the R.C.D.S./O.D.H.A Liaison Committee and not by the Ad Hoc Committee. However, the Ad Hoc Committee will wait for the Liaison Committee's report before proceeding with further directives and objectives regarding the delivery of dental care to patients in institutions, public health and collective living centres.

Treasurer

REPORT OF THE TREASURER

Kenneth F. Pownall, D.D.S.



FINANCIAL STATEMENTS

Attached to this report are the following:

- Appendix A – the Auditors' Report
- Appendix B – the Balance Sheet as at December 31, 1983
- Appendix C – the Statement – the General Fund
- Appendix D – the Statement – the Professional Liability Insurance Fund
- Appendix E – the Statement – the Centennial Fund
- Appendix F – the Statement – the Harry R. Abbott Memorial Library Fund
- Appendix G – the Notes to the Financial Statements

BALANCE SHEET

The Balance Sheet which shows the exact state of our finances as of December 31st, 1983 confirms that the College's finances remain sound albeit our surplus is diminished somewhat from that of December 31st, 1982.

STATEMENTS OF REVENUE AND EXPENSES AND SURPLUS

a) The General Fund

Revenue

The annual membership fee for dentists and the annual licence fee for dental hygienists provides the College with the main source of its revenue. Please note that approximately one-third of the total of this revenue is transferred directly to the Professional Liability Insurance Fund.

The item "examination fees" refers to dental hygiene examinations. Before any hygienist can be licensed in Ontario for the first time, he or she is required to successfully complete an examination.

Interest on investments continues to generate a considerable amount of revenue for the College although interest rates have dropped dramatically in the past two years. The reduction in interest rates is reflected in the fact that our actual revenue for 1983 is less than 1982.

Property rent is the revenue obtained from a small apartment in our building that is occupied by our caretaker. Sundry revenue is derived mainly from the sale of our list of members to dental-related companies. The small fee we charge for expenses at our continuing education courses around the province is listed as "continuing education".

Expenses

The increase in expenses in 1983 over 1982 is mainly due to the increased activity of the College as well as a general increase in the cost of doing business. The cost of telephone and equipment increased in 1983 because of some needed updating in our computer and word processing equipment as well as the purchase of our own phone system. "Honoraria" is the stipend paid to members of Council; "council and committee" refers to travel and accommodation of members of Council when serving the College.

Surplus

For the first time in several years, we experienced an excess of expenses over revenue in 1983. Notwithstanding this loss, it is pleasant to report that we still have a considerable surplus in our general funds.

Warning lights are flashing with regard to our future finances. Increases in the cost of premiums and the operation of our professional liability fund are imminent. The ever mounting obligations being placed on the College demand an increase in our staff at all levels. Associated with additional responsibilities and related additional staff is the question of additional accommodation.

As the treasurer of the College, I am bringing to your attention that in the near future it will be necessary to increase our revenue if we are to continue to function as we ought.

b) The Professional Liability Insurance Program

Details on the plan are covered in the Report of the Professional Liability Insurance Committee.

c) The Centennial Fund

This Fund was established in 1968 to commemorate the Centennial of the R.C.D.S. The original purpose of the Fund was to establish and update from time to time the exhibit on dentistry at the Ontario Science Centre. The Fund has not been used for several years.

d) The Harry R. Abbott Memorial Library Fund

The Will of the late Mrs. Dorinda Tully which was probated in 1924 established a trust fund. The fund is a memorial to her brother, Dr. H.R. Abbott, who was President of the R.C.D.S. from 1903 to 1907. The terms of the Will direct that the interest from the Fund be paid annually to the R.C.D.S. for the purchase of books for the R.C.D.S. Library. The R.C.D.S. Library became the Library of the Faculty of Dentistry, University of Toronto, in 1925. Since it is costly to attempt to change the wording of the Will, the money accumulating from the investments is paid to the R.C.D.S. and the College forwards the money to the Faculty of Dentistry of the University of Toronto.

RE-APPOINTMENT OF AUDITORS

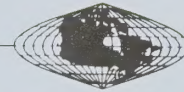
The firm of Thorne Riddell continues to provide very efficient and capable auditing services as it has for many years. It is recommended that they be re-appointed as our auditors for the year 1984.

APPRECIATION

Presenting this Report provides me with the opportunity to bring to the attention of the members of the College a fact of which I believe many of you are well aware. This College is fortunate to have a staff of loyal and devoted people. I appreciate the assistance they provide in the administration of the R.C.D.S.

**THORNE
RIDDELL**

Chartered Accountants

**AUDITORS' REPORT**

To the Members of the Council of
The Royal College of Dental Surgeons of Ontario

We have examined the balance sheet of The Royal College of Dental Surgeons of Ontario as at December 31, 1983 and the statements of revenue and expenses and surplus for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the College as at December 31, 1983 and the results of its operations for the year then ended in accordance with the basis of accounting described in note 1 applied consistently with that of the preceding year.

Toronto, Canada
March 30, 1984

Thorne Riddell

Chartered Accountants

B**THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO**

(Incorporated under the Health Disciplines Act, Part II, of Ontario)

BALANCE SHEET AS AT DECEMBER 31, 1983

ASSETS	1983	1982	LIABILITIES	1983	1982
GENERAL FUND					
Funds held in trust (note 2)	\$ 8,122	\$ 9,525	Trust funds	\$ 8,122	\$ 9,525
Cash	97,355	417,594	Accounts payable	66,562	69,107
Investment in bonds and			Deferred revenue, licentiate fees	842,010	852,118
bank deposits	1,550,618	1,108,398		916,694	930,750
Accounts receivable	110,322	47,106			
Prepaid expenses		10,250			
Receivable from Professional					
Liability Insurance Fund	5,578	400,824	Surplus	855,301	1,062,947
	\$1,771,995	\$1,993,697		\$1,771,995	\$1,993,697

PROFESSIONAL LIABILITY INSURANCE FUND

Cash	\$ 481,747	\$ 481,989	Deferred revenue, members'		
Investment in bonds and			assessments	\$ 419,750	\$ 425,270
bank deposits	2,303,240	2,676,737	Provision for unsettled claims		
Accounts receivable	300,797	65,096	(note 3)	607,600	589,000
			Payable to General Fund	5,578	400,824
			Surplus	2,052,856	1,808,728
	\$3,085,784	\$3,223,822		\$3,085,784	\$3,223,822

CENTENNIAL FUND

Cash	\$ 27,980	\$ 26,021			
Interest receivable	167	198			
	\$ 28,147	\$ 26,219	Surplus	\$ 28,147	\$ 26,219

HARRY R. ABBOTT MEMORIAL LIBRARY FUND

Cash	\$ 51	\$ 1,387			
Interest receivable	2,700				
	\$ 2,751	\$ 1,387	Surplus	\$ 2,751	\$ 1,387

THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO
GENERAL FUND
STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1983

	1983	1982
Revenue		
Licence, registration and examination fees		
Dentists	\$1,660,083	\$1,586,433
Less portion attributable to the Professional		
Liability Insurance Fund	576,380	551,540
	1,083,703	1,034,893
Hygienists	114,384	108,679
Examination fees	40,925	42,800
Interest	164,154	248,052
Property rent	2,300	2,200
Sundry	10,060	11,824
Continuing education	69,030	56,531
Administration charge to the Professional		
Liability Insurance Fund	30,000	20,000
	1,514,556	1,524,979
Expenses		
Salary and salary charges	504,762	424,349
Postage and courier	58,749	37,481
Printing, stationery and supplies	124,441	71,163
Telephone	33,448	16,029
Equipment - purchase, rental and maintenance	98,642	33,739
Property expenses	52,846	80,127
Staff travel	49,828	43,603
Examinations	48,571	34,060
Honoraria	260,832	177,719
Continuing education	98,793	85,831
Professional fees		
Legal	225,045	182,032
Audit	7,700	7,000
Consulting		14,081
Council insurance	1,495	1,495
Council and committee	113,968	72,396
Radiation safety survey	380	22,638
Grants		
Canadian Dental Association	23,815	23,575
Canadian Fund for Dental Education	1,000	1,000
University of Toronto	4,618	3,300
University of Western Ontario	2,300	2,300
Other	2,608	2,569
Sundry	8,361	6,915
	1,722,202	1,343,402
EXCESS OF REVENUE OVER EXPENSES		
(EXPENSES OVER REVENUE)	(207,646)	181,577
SURPLUS AT BEGINNING OF YEAR	1,062,947	881,370
SURPLUS AT END OF YEAR	\$ 855,301	\$1,062,947

D

**THE ROYAL COLLEGE OF DENTAL SURGEONS
OF ONTARIO**

PROFESSIONAL LIABILITY INSURANCE FUND

STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1983

	1983	1982
Revenue		
Members' assessments.....	\$ 576,380	\$ 551,540
Interest	336,797	348,394
	913,177	899,934
Expenses		
Insurance premium	147,952	113,655
Broker and consultant fees	14,908	16,238
Insurance adjuster	46,757	24,184
Claims	64,701	63,925
Provision for unsettled claims (note 3)	365,062	312,788
Administration charge from General Fund ..	30,000	20,000
Sundry	(331)	4,296
	669,049	555,086
EXCESS OF REVENUE OVER EXPENSES	244,128	344,848
SURPLUS AT BEGINNING OF YEAR	1,808,728	1,463,880
SURPLUS AT END OF YEAR	\$2,052,856	\$1,808,728

E

**THE ROYAL COLLEGE OF DENTAL SURGEONS
OF ONTARIO**

CENTENNIAL FUND

STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1983

	1983	1982
Revenue		
Interest	\$ 1,978	\$ 3,287
Expenses		
Professional fees	50	50
EXCESS OF REVENUE OVER EXPENSES	1,928	3,237
SURPLUS AT BEGINNING OF YEAR	26,219	22,982
SURPLUS AT END OF YEAR	\$28,147	\$26,219

F

**HARRY R. ABBOTT
MEMORIAL LIBRARY FUND**

**STATEMENT OF REVENUE AND EXPENSES
AND SURPLUS**
YEAR ENDED DECEMBER 31, 1983

	1983	1982
Revenue		
Interest	\$3,051	\$1,813
Expense		
Grant to University of Toronto Library Fund	1,687	1,850
EXCESS OF REVENUE OVER EXPENSES (EXPENSES OVER REVENUE)	1,364	(37)
SURPLUS AT BEGINNING OF YEAR	1,387	1,424
SURPLUS AT END OF YEAR	\$2,751	\$1,387

G

NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 1983

1) Accounting Policies

The College follows generally accepted accounting principles except that the cost of furniture, equipment and leasehold improvements is included in expenses as incurred (1983, \$101,425; 1982, \$46,304).

2) Segregated Funds

At December 31, 1983 the Association maintained in trust \$8,122 (1982, \$9,525) for refund to patients following claims made against member dentists.

3) Professional Liability Insurance Fund

This fund was established by the College by allocating a portion of the fees charged to Dentists on an annual basis as approved by the Board. The insurance coverage for claims has been established to cover validated claims in excess of a deductible portion on an annual basis. The College is liable for the first \$25,000 of a validated claim subject to a maximum loss limit on an annual basis of \$360,000 (1982, \$300,000). The Dentists are liable to the College for a deductible portion on each validated claim of \$500 (1982, \$250). The College is additionally liable for all insurance adjuster fees related to claims arising since January 1, 1977. Provision has been recorded in the accounts for the liability with respect to unsettled claims and the insurance adjuster fees related thereto. Final settlement of claims is subject to satisfactory resolution between the insurance company and the College.

4) Long Term Lease

In 1972 the land and building at 230 St. George Street was sold to The Ontario Dental Association for \$2. The Royal College of Dental Surgeons of Ontario has leased the land and building from The Ontario Dental Association for a period of twenty-five years expiring September 30, 1997 for \$1 plus various operating charges as specified in the lease with an option to renew for an additional twenty-five years and a right of first refusal on any offer for purchase of the property.

Statistical

REPORT / YEAR ENDING DEC. 31, 1984

DEGREE OF 'BUSYNESS' OF ONTARIO DENTISTS / 1984

Years since Graduation	Number of DDS Responding	% of Respondents Less Busy than Would Like	% of Respondents Content with Patient Load	% of Respondents Too Busy
0-4	239	71	28	1
5-9	478	62	37	1
10-14	446	45	53	2
15-19	351	40	57	3
20-24	217	41	58	1
25-29	185	34	64	2
30-34	168	28	67	5
35-39	118	24	71	5
above 50	81	15	80	5

LICENSED DENTISTS DECEASED

Albus, L.W. (1979)	Dec. 21, 1983
Baird, E.G. (1956)	Dec. 19, 1983
Bolta, I.J. (1976)	May 18, 1984
Budgen, H.C. (1950)	Jan. 6, 1984
Clarke, J.M. (1939)	Oct. 30, 1983
*Dolson, W.J.M. (1913)	Aug. 17, 1983
Galvin, K.R. (1943)	May 12, 1984
*Higginson, T.D. (1908)	Jan. 9, 1984
*Hoffman, R.W. (1916)	Dec. 25, 1983
Kaukinen, A.B. (1941)	Oct. 6, 1984
Large, V.H. (1925)	Jan. 25, 1984
McLean, W.F. (1921)	Apr. 15, 1984
Patzalek, H.A. (1946)	Feb. 8, 1984
Pepper, J.B. (1933)	Oct. 13, 1984
Sproule, J.B. (1941)	Oct. 16, 1984

*Denotes Life Member (Year of Graduation)

LICENCES ISSUED

Dentists

5168 Members*

*(Includes 9 Life Members and 265 Out-of-Province Members)

Dental Hygienists

2386

REMOVALS AND REINSTATEMENTS

Left Ontario	16
Deceased	16
Retired	38
Not Renewing	47
Removed	16
Reinstated	62

ADDITIONS TO THE REGISTER

University of Toronto	98
University of Western Ontario	42
N.D.E.B. Certificates	62
General Licence (from Education)	27
Academic Licence	1
Approved by the Registration Committee	2

RATIO OF DENTISTS TO POPULATION IN ONTARIO

Dec. 31, 1984

POPULATION8,818,300

NUMBER OF DENTISTS4,901

RATIO1:1799

Electoral District	County Region or District	Assessed Population	No. of Dentists	Dentist/Population
No. 1	Frontenac	110,500	65	1:1700
	Lanark	47,200	16	1:2950
	Leeds, Grenville	82,000	31	1:2465
	Lennox, Addington	34,000	6	1:5667
	Prescott, Russell	54,100	18	1:3006
	Renfrew	88,200	36	1:2450
	Stormont, Dundas and Glengarry	101,900	28	1:3639
	Regional Municipality of Ottawa-Carleton	571,700	360	1:1588
	TOTALS	1,089,600	560	1:1945

Population Ratio

1984 1:1945

1983 1:1949

No. 2	Hastings	108,700	48	1:2265
	Northumberland	66,000	24	1:2750
	Peterborough	103,600	47	1:2204
	Prince Edward	22,500	6	1:3750
	Victoria	50,100	13	1:3354
	Haliburton	11,800	2	1:5900
	Regional Municipality of Durham	299,400	137	1:2185
	TOTALS	662,100	277	1:2390

Population Ratio

1984 1:2390

1983 1:2247

No. 3	Algoma	138,900	64	1:2170
	Cochrane	98,700	32	1:3084
	Kenora	60,500	23	1:2360
	Manitoulin	11,100	4	1:2775
	Nipissing	80,400	38	1:2116
	Rainy River	23,000	9	1:2556
	Sudbury	185,900	70	1:2656
	Thunder Bay	154,300	74	1:2085
	Timiskiming	41,500	16	1:2593
	TOTALS	794,300	330	1:2406

Population Ratio

1984 1:2406

1983 1:2379

No. 4	Metropolitan Toronto	2,139,000	1,719	1:1244
	York Region	282,000	136	1:2074
	TOTALS	2,421,000	1,855	1:1305

Population Ratio

1984 1:1305

1983 1:1352

Electoral District	County Region or District	Assessed Population	No. of Dentists	Dentist/Population
No. 5	Bruce	62,100	18	1:3450
	Dufferin	32,400	12	1:2700
	Grey	74,400	29	1:2566
	Huron	56,300	18	1:3127
	Simcoe	232,300	112	1:2074
	Districts of Muskoka	39,400	16	1:2463
	Parry Sound	34,200	12	1:2850
	TOTALS	531,100	217	1:2447
Population Ratio				
1984 1:2447				
1983 1:2411				

No. 6	Elgin	69,600	22	1:3164	
	Essex	310,000	143	1:2168	
	Kent	105,600	47	1:2247	
	Lambton	127,000	63	1:2016	
	Middlesex	322,900	242	1:1334	
	TOTALS		935,100	517	1:1808
	Population Ratio				
1984		1:1808			
1983		1:1889			

No. 7	Brant	105,300	36	1:2925
	Oxford	85,900	32	1:2684
	Perth	66,100	27	1:2448
	Wellington	133,400	65	1:2052
	Regional Municipality of Hald-Norfolk	90,200	27	1:3341
	Regional Municipality of Waterloo	314,300	159	1:1977
	TOTALS	795,200	346	1:2298
	Population Ratio			
1984	1:2298			
1983	1:2284			

No. 8	Regional Municipality of Halton	265,400	139	1:1909
	Hamilton-Wentworth	417,900	224	1:1866
	Niagara	371,300	184	1:2018
	Peel	535,300	252	1:2124
	TOTALS	1,589,900	799	1:1990
	Population Ratio			
1984	1:1990			
1983	1:1968			

AGE RANGE OF DENTISTS BY COUNTY

County, District, Region	Less than 31	31-40	41-50	51-60	61-65	Over 66	Total
BRANT	2	19	12	1	1	1	36
BRUCE	3	10	2	1	2	—	18
DUFFERIN	—	6	4	1	—	1	12
ELGIN	2	11	3	4	2	—	22
ESSEX	17	70	24	20	8	4	143
FRONTENAC	9	28	11	4	10	3	65
GREY	2	10	8	6	1	2	29
HALDIMAND NORFOLK	5	9	7	4	—	2	27
HALIBURTON	—	—	2	—	—	—	2
HALTON	29	50	37	13	9	1	139
HASTINGS	7	21	9	6	3	2	48
HURON	6	6	2	3	—	1	18
KENT	13	15	10	6	1	2	47
LAMBTON	16	27	6	7	4	3	63
LANARK	3	5	4	3	1	—	16
LEEDS GRENVILLE	2	11	7	7	2	2	31
LENNOX ADDINGTON	—	1	4	—	—	1	6
METRO TORONTO	323	541	407	244	118	86	1719
MIDDLESEX	43	83	47	40	19	10	242
MUSKOKA	5	3	3	4	—	1	16
NIAGARA	28	67	33	37	9	10	184
NORTHUMBERLAND	4	10	5	2	2	1	24
DURHAM	22	64	28	17	6	—	137
OTTAWA CARLTON	58	139	72	58	18	15	360
OXFORD	2	13	9	5	3	—	32
PEEL	65	103	57	19	3	5	252
PERTH	3	10	7	3	3	1	27
PETERBOROUGH	3	20	15	5	3	1	47
PRESCOTT RUSSELL	3	9	3	1	2	—	18
PRINCE EDWARD	2	—	2	1	1	—	6
RENFREW	6	19	4	6	—	1	36
SIMCOE	28	44	19	12	5	4	112
STORMONT DUNDAS GLEN.	6	9	7	4	—	2	28
VICTORIA	—	2	8	—	2	1	13
WATERLOO	21	66	38	20	9	5	159
WELLINGTON	12	22	18	5	6	2	65
HAMILTON WENTWORTH	34	74	52	36	16	12	224
YORK	39	59	21	14	1	2	136
ALGOMA	12	22	14	12	4	—	64
COCHRANE	9	14	7	2	—	—	32
KENORA KENORA P.P.	7	9	5	1	1	—	23
MANITOULIN	—	3	—	—	1	—	4
NIPISSING	5	11	8	10	3	1	38
PARRY SOUND	2	5	1	3	—	1	12
RAINY RIVER	3	2	—	4	—	—	9
SUDBURY	13	25	11	16	3	2	70
THUNDER BAY	9	34	18	9	1	3	74
TIMISKAMING	2	4	4	5	1	—	16
Totals	885	1784	1075	681	284	191	4901
Percentage of Total	18.1	36.3	21.9	13.9	5.9	3.9	100

PRESIDENTS

*B.W. Day	Apr. 1868 – Jun. 1870
*H.T. Wood	Jun. 1870 – Jul. 1874
*C.S. Chittenden	Jul. 1874 – May 1889
*H.T. Wood	May 1889 – Mar. 1893
*R.J. Husband	Mar. 1893 – Apr. 1899
*G.E. Hanna	Apr. 1899 – Apr. 1901
*A.M. Clark	Apr. 1901 – Apr. 1903
*H.R. Abbott	Apr. 1903 – Apr. 1907
*R.B. Burt	Apr. 1907 – Apr. 1909
*G.C. Bonnycastle	Apr. 1909 – May 1911
*W.J. Bruce	May 1911 – May 1913
*D. Clark	May 1913 – May 1915
*W.C. Davy	May 1915 – May 1917
*W.C. Trotter	May 1917 – May 1918
*W.M. McGuire	May 1918 – May 1921
*M.A. Morrison	May 1921 – May 1923
*A.D.A. Mason	May 1923 – May 1925
*E.E. Bruce	May 1925 – May 1927
*R. Gordon McLean	May 1927 – May 1929
*S.S. Davidson	May 1929 – Jun. 1931
*S.M. Kennedy	Jun. 1931 – May 1933
*H. Irvine	May 1933 – May 1935
*G.H. Holmes	May 1935 – May 1937
*E.C. Veitch	May 1937 – May 1939
*L.D. Hogan	May 1939 – May 1941
*F.A. Blatchford	May 1941 – May 1943
*G.H. Campbell	May 1943 – May 1945
*S.W. Bradley	May 1945 – May 1947
*H.W. Reid	May 1947 – May 1949
*S.J. Phillips	May 1949 – May 1951
*R.O. Winn	May 1951 – May 1953
C.M. Purcell	May 1953 – May 1955
*R.J. Godfrey	May 1955 – May 1957
*M.C.G. Bebee	May 1957 – May 1959
*M.V.J. Keenan	May 1959 – May 1961
*A.H. Leckie	May 1961 – Apr. 1963
W.G. Bruce	Apr. 1963 – Apr. 1965
J.P. Coupland	Apr. 1965 – Feb. 1967
J.D. Purves	Feb. 1967 – Jan. 1969
H.M. Jolley	Jan. 1969 – Jan. 1971
N.L. Diefenbacher	Jan. 1971 – Jan. 1973
P.P. Zakarow	Jan. 1973 – Jan. 1975
R. Paul McCutcheon	Jan. 1975 – Jan. 1977
E.G. Sonley	Jan. 1977 – Jan. 1979
A.J. Calzonetti	Jan. 1979 – Jan. 1981
C.A. Doughty	Jan. 1981 – Jan. 1983
R.L.J. Filion	Jan. 1983 – Jan. 1985

SECRETARIES

*J. O'Donnell	Apr. 1868 – Jul. 1870
*J.B. Willmott	Jul. 1870 – Jun. 1915
*W.E. Willmott	Jul. 1915 – May 1940
*Don. W. Gullett	May 1940 – Jul. 1956
Wesley J. Dunn	Jul. 1956 – Feb. 1965
Kenneth F. Pownall	Feb. 1965 –

*Deceased



Proceedings of the Royal College of Dental Surgeons of Ontario
1985

UNIVERSITY OF TORONTO
134 EDWARD ST.
TORONTO 2
ONTARIO, CANADA

REFERENCE

FROM THE

1985 Proceedings

THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO
230 St. George Street, Toronto, Ontario M5R 2N5

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REPORT OF THE R.C.D.S. PRESIDENT / 1985

Gary E. Pitkin, D.D.S.

As I complete the first half of my term as President of the R.C.D.S., it is a pleasant task to report, in highlight form, on a number of important on-going projects, concerns and philosophical directions evident amongst this new Council. Within the individual reports of the 1985 Proceedings, you will find many of the details focussed on that I will allude to in my message.

First and foremost, I must commend highly the fine members of this Council for their thoroughness and dedication, and especially for their support and responsiveness to the fiscal concerns of the College's finances. Our staff members can justifiably be proud also of their important contribution to this success as well and it is a pleasure to share with them the results of our efforts. The financial situation of this College was of grave concern to the Council when we started our terms. Due to the diligence and responsible attitudes of all, the cost of maintaining our privilege of self-government seems to be under control despite the ever-increasing complexities of running the business and professional aspects of the College.

The remedial philosophies exemplified by the Complaints and Discipline Committees, and supported fully by this Council, seem to be bringing positive results and favourable



attitudes. Many of us have often thought that in situations where purely clinical competence was deficient, it was folly to simply punish individuals. Is it not preferable to attempt to remedy the shortcoming and improve one's clinical performance? I hope this is the case, for in this way, everyone comes out ahead - certainly, the practitioner in a renewed vigour and enjoyment of his clinical skills, his patients in the quality of treatment afforded them and indeed, the entire profession of dentistry in the general betterment of our self-esteem. With regards to the reporting of Discipline cases, you will find in future more specific and timely disclosing of the details rather than that form used in this issue of the Proceedings. Hopefully, this will allow those individuals involved to put the issues behind them sooner and thus return to productive practice.

Two major issues facing the College now involve the supervision of dental hygienists and the attempt to assure the provision of freedom of choice both for the patients of

this province and their dental practitioners. Very intensive work regarding the issue of supervision for dental hygienists has taken place this year and it appears that a solution may be at hand that will satisfy both the legalities and practicalities of the problem. I expect a great deal of activity to occur in this area in the second half of my term. The College also continues to be concerned with the limiting of freedom of choice apparent within the nature of many dental care delivery systems appearing on the horizon in recent years. This Council will strive to liaise with the Minister of Health in an attempt to ensure this most obvious of democratic rights and we fully intend on aggressively pursuing this goal.

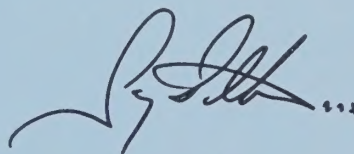
Your professional liability insurance continues to be a great bargain in this province but I am alarmed at the increase in claims, the recent increase in our premium rates and the apparent concern that very few carriers seem interested in dealing with this type of coverage. The potential for premium leveraging is obvious. I know the College will be watching this activity with interest; as well, we are studying the incidence of claims repeaters and the problem of some members of the College perhaps not requiring our coverage in addition to that provided by either their employers or other plans.

This past year has also seen a lot of activity dealing with eventual positive revamping of our Registration requirements and regulations (an on-going study) and our continuing efforts in dealing with the processes of the Health Legislative Review Committee. Dentistry's future is being decided **now** and the R.C.D.S. will be an active participant and leader in this most important task. It is not enough to merely observe the legislative change peripherally anymore - we **must** assure that the respect earned by those who preceded us is not only maintained but enhanced. We can be

*It is not enough to merely observe the legislative change peripherally anymore - we **must** assure that the respect earned by those who preceded us is not only maintained but enhanced.*

proud of this respect - our profession has earned it!

This Council has continued the communicative style prudently introduced by my predecessor, Dr. Richard Filion, and I applaud its growth and development. These are truly dynamic and exciting times we live in and it has been a pleasure to share some of those feelings with you in this message. The public of this province can rest assured that this Council is responsible and acting in their best interest - none of them would have it any other way. I am most fortunate to have the honour of acting as their spokesman and representative and appreciate, more than these few words can say, their expressions of confidence in me. As the first half of my term ends, I pledge to continue this service on both my Council's and the public's behalf to the best of my ability and I wish each and every one of you success and satisfaction in the coming year.



Gary E. Pitkin, D.D.S.
President

Elections / Council

ELECTIONS

In accordance with the Health Disciplines Act and Ontario Regulation 447, an election of the Council of The Royal College of Dental Surgeons of Ontario was held from October to December, 1984.

In addition, as directed by Council, elections were held for the dental hygienists to serve as Official Observers on Council.

In early October 1984, nominations were called for by circular letter to each licensed dentist and dental hygienist registered in Ontario as of September 30th, 1984. Valid nominations were received from all districts.

The following candidates were declared elected by acclamation:

District No. 1: Dr. W.H. "Trev." Treleven

District No. 7: Dr. Richard M. Beyers

District No. 8: Dr. Randall Lang

Dental Hygienist Observers from:

Metropolitan Toronto & York Region: Mrs. Rosemary Donaldson

Outside Metropolitan Toronto & York Region: Mrs. Lynda Michelson

The results of the elections held in District Nos. 2, 3, 4, 5 and 6 are as follows:

District No. 2: Dr. James I. Fawcett 91
Dr. W. Robert Patrick (elected) 105

District No. 3: Dr. Richard L.J. Filion (elected) 155
Dr. Raymond Kury's 105

District No. 4: Dr. Joseph Druck 320
Dr. Rollin M. Matsui (elected) 716
Dr. Gary E. Pitkin (elected) 672
Dr. Redvers Warren 328

District No. 5: Dr. Warren R. Hilliard (elected) 87
Dr. R. Gordon Woolidge 84

District No. 6: Dr. George Grayson (elected) 226
Dr. Lorne V. Taylor 152

The above election results were validated by the Returning Officers, Dr. M. Jackson and Dr. J. Kreutzer on December 12th, 1984.

The Faculty of Dentistry at the University of Toronto and the University of Western Ontario have appointed Dr. Gordon Nikiforuk and Dr. Wesley J. Dunn as Faculty Representatives on the R.C.D.S. Council.

According to notification received from the Ministry of Health, the following have been appointed by government as members of the R.C.D.S. Council: Mrs. Zita M. Dossett, Kingston; Mrs. Eunice Swadron, Thornhill; Mr. John Stefura, Sudbury; Rev. Rondo P. Thomas, Toronto.



R.C.D.S. COUNCIL 1985

Top Row: G. Nikiforuk, Z. Dossett, L.L. Mickelson, R. Donaldson, E. Swadron, R.M. Matsui

Middle Row: R.M. Beyers, J. Stefura, W.H. Treleven, W.R. Hilliard, G.G. Grayson, R.T. Lang

Bottom Row: R.L.J. Filion, W.R. Patrick (Vice President), G.E. Pitkin (President), K.F. Pownall (Registrar),
Rev. R.P. Thomas, W.J. Dunn

Committees / Staff

COMMITTEES

President: G.E. Pitkin
Vice President: W.R. Patrick

STATUTORY COMMITTEES

Executive: G.E. Pitkin, Chairman;
W.J. Dunn,
R.L.J. Filion,
W.R. Patrick,
R.P. Thomas,
* R. Donaldson.

Registration: R.M. Matsui, Chairman;
W.J. Dunn,
E. Swadron,
* L.L. Mickelson.

Complaints: W.R. Hilliard, Chairman;
Z.M. Dossett,
R.M. Matsui,
* L.L. Mickelson.

Discipline: R.L.J. Filion, Chairman;
R.M. Beyers,
G.G. Grayson,
R.T. Lang,
G. Nikiforuk,
J. Stefura,
E. Swadron,
W.H. Treleaven,
* R. Donaldson.

STANDING COMMITTEES

Education: W.H. Treleaven, Chairman;
R.M. Beyers,
G.G. Grayson,
J. Stefura,
R. Donaldson.

Finance and Property: W.R. Patrick, Chairman;
R.M. Beyers,
R.L.J. Filion,
R.T. Lang,
R.P. Thomas,
L.L. Mickelson.

Legal and Legislation: R.T. Lang, Chairman;
W.J. Dunn,
R.M. Matsui,
W.R. Patrick,
E. Swadron,
R. Donaldson.

Professional Liability Insurance: R.M. Beyers, Chairman;
G. Nikiforuk,
E. Swadron,
W.H. Treleaven,
R. Donaldson.

Anaesthesia and Sedation: W.H. Treleaven, Chairman;
G.G. Grayson,
W.R. Hilliard,
and a Representative from each dental faculty, the Ontario Society of Oral & Maxillofacial Surgeons, the Ontario Dental Society of Anaesthesiology and the Conscious Sedation Study Club.

R.C.D.S./O.D.A. Liaison: G.E. Pitkin, Chairman;
R.L.J. Filion,
R.T. Lang,
G. Nikiforuk,
R.P. Thomas,
R. Donaldson.

R.C.D.S./O.D.H.A. Liaison: G.G. Grayson, Chairman;
G. Nikiforuk,
R.P. Thomas,
R. Donaldson,
L.L. Mickelson,
J.A. Pearce (resource person).

Manpower: W.R. Patrick, Chairman;
Z.M. Dossett,
G.G. Grayson,
R.M. Matsui,
R. Donaldson.

Quality Assurance: R.M. Matsui, Chairman;
R.L.J. Filion,
W.R. Nikiforuk,
J. Stefura,
W.H. Treleaven,
L.L. Mickelson.

Redistribution: W.J. Dunn, Chairman;
R.T. Lang,
R.M. Matsui,
W.R. Patrick,
J. Stefura,
L.L. Mickelson.

Delivery of Dental Care to Patients in Institutions, Public Health and Collective Living Centres: G. Nikiforuk, Chairman;
R.M. Beyers,
Z.M. Dossett,
W.J. Dunn,
W.R. Hilliard,
W.H. Treleaven,
L.L. Mickelson.

* May be invited to attend any meeting of the Committee (without voting privileges) where matters involving dental hygiene or a specific dental hygienist are to be considered.

STAFF

Registrar, Secretary / Treasurer: Dr. Kenneth F. Pownall, D.D.S.

Deputy Registrar: Dr. Edward Fox, D.D.S.
☐ Discipline ☐ Malpractice

Assistant-to-the-Registrar: Dr. Donald McFarlane, D.D.S.
☐ Complaints Officer ☐ Education & College Publications
☐ Anaesthesia & Sedation

Inspector: Mr. Frank Greer
☐ Discipline ☐ Investigations ☐ Illegal Practice

Executive Assistant: Mrs. Linda D. Strevens, B.Sc.D.
☐ Education ☐ Auxiliary Liaison ☐ Investigations

Solicitors: Shibley, Righton & McCutcheon

Auditors: Thorne Riddell

Bankers: The Royal Bank of Canada

Electoral Districts



R.C.D.S. COUNCIL ELECTORAL DISTRICTS



W.R. "Bob" Patrick, D.D.S.
Trenton



W.H. "Trev" Treleaven, D.D.S.
Kingston



G.E. "Gary" Pitkin, D.D.S.
Toronto



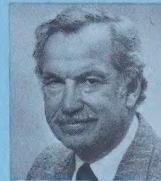
R.M. "Rollin" Matsui, D.D.S.
Toronto



"Randy" Lang, D.D.S.
Mississauga



UNIVERSITY REPRESENTATIVES



W.J. "Wes" Dunn, D.D.S.
London



G. "Gordon" Nikiforuk, D.D.S.
Toronto

GOVERNMENT APPOINTEES



Z.M. "Zeta" Dossett
Kingston



E. "Eunice" Swadron
Thornhill



J. "John" Stefura
Sudbury



R.P. "Rondo" Thomas
Scarborough

DENTAL HYGIENIST OBSERVERS



R. "Rosemary" Donaldson
Toronto



L.L. "Lynda" Mickelson
Thunder Bay

REPORT OF THE EXECUTIVE COMMITTEE

Chairman: G.E. Pitkin, D.D.S.

Committee Members: W.J. Dunn, D.D.S., R.L.J. Filion, D.D.S., W.R. Patrick, D.D.S., Rev. R.P. Thomas, R. Donaldson*

The Executive Committee of the College is composed of the President and Vice-President of the R.C.D.S. along with one lay member and either one or two other members of the Council elected from their ranks. The Executive is responsible for carrying on the College's business between full meetings of the Council and, in fact, is charged with the responsibility of acting as the Council at these times. All matters not directly related to other specific R.C.D.S. Committees are dealt with by the Executive along with the task of examining complaints outside the strict definition and parameters of those handled by the Complaints Committee (e.g.— anonymous complaints). The Executive can direct matters to other Committees, or have matters sent to them by other Committees. We also deal with the approval of group clinic names, follow-ups on practice evaluations as a result of Complaints or Discipline Committee directives, government liaison and a myriad of other duties that arise in the day-to-day running of the College. In 1986, the Executive will also be undertaking the duties of the Finance and Property and Legal and Legislation Committees on a one-year trial basis in order to streamline our efficiency and control the ever-mounting costs of running the College.

Highlighting a few of our activities in 1985 that may or may not be covered in other Committee reports could be a Herculean task as the Executive deals with so many items through the course of a year. I have chosen to keep this brief and concise and encourage you to contact your R.C.D.S. representatives if you want more detail regarding these items.

In no particular order, what follows then in point form are a few highlights of our 1985 dealings:

1. The subject of "clustering" has been extensively discussed. By "clustering", I mean the potential structure by which the health groups directly related to dentistry could function under the auspices of the revamped Health Disciplines Act. The governmental Committee looking into the review of the Act requested us to address this issue.
2. A decision was confirmed that the owner of the individual patient records, in the event of a group practice dissolution, must retain the records for a minimum of ten years.
3. The Executive wishes to alert the profession that we are becoming more and more alarmed at the unprofessionalism being exhibited by some members of the College in their pursuit of "marketing" advantages. Many of these have crossed the frontier of legality, not to mention good taste, and the College is prepared to deal with them in a serious manner.
4. The potential need for a larger office space continues to concern us and the Executive monitors this problem regularly. Also, the need for more staff is being addressed presently by a sub-Committee of Dr. Richard Filion and Dr. Bob Patrick. It is expected that a new dentist staff member will be hired in 1986.

5. The Executive dealt many times with the issues related to the Health Legislation Review and also the drafting of a "freedom of choice" regulation for the people of Ontario. We hope to have positive results with these matters in 1986.
6. A decision was made to allow practitioners with multiple practice locations, i.e.— in different cities or towns, to list these other locations in addition to their principal one in the next issue of the R.C.D.S. "Listings" we send to you each year. It was thought that this would be a benefit to your patients in cases of referral.
7. In October, those members of the Executive, not involved in any way with the Discipline Committee, examined pending Discipline cases in an effort to expedite their handling. There was concern that some of the pending cases may have been inappropriately referred or awaiting action for inordinate amounts of time. It was felt that this exercise was very worthwhile.
8. The Executive has directed that a group or clinic with an assumed name must change their designation within a year if they no longer meet the requirements necessary for the use of the name (e.g.— three full-time dentists).
9. In December of 1985, a very productive meeting was held with some of the members of the Health Disciplines Board and their legal counsel. A number of procedural concerns were discussed mutually and, I believe, both groups very much benefitted from this dialogue.
10. The Executive in 1986 hopes to be able to present to the entire R.C.D.S. Council a proposal for a regulation to govern the direction and supervision of dental hygienists. We are currently working on this issue and hope to complete this most important task for presentation to the government early in the year.

Other than the most pressing issues, the Executive will continue to deal with the daily business of the College and attempt to provide our members and the public with the professional services of self-government in the exemplary manner that we have come to expect through the years. We continue to exemplify what is best in self-government. I believe, and I know my Executive will continue to respond in this fashion in the coming year. I have the utmost faith in them, both as Councillors and as people, and I am confident that they will always do what is best in protecting the public of Ontario.

Registration

REPORT OF THE REGISTRATION COMMITTEE

Chairman: R.M. Matsui, D.D.S.

Committee Members: W.J. Dunn, D.D.S., E. Swadron, L.L. Mickelson*

In 1985, the Registration Committee met on eight occasions to deal with various applications for licensure and certification. Applications for licensure in which all requirements are met, are granted by the Registrar.

There were 40 specialty certifications granted in 1985. These included 9 Periodontists, 5 Paedodontists, 9 Orthodontists, 8 Oral and Maxillofacial Surgeons, 2 Oral Pathologists, 4 Endodontists and 3 Public Health Dentists.

Periodontists

Arnold E.G. Fleming, Harinder S. Sandhu, Hurd A. Stein, Ronald B.N. Palinka, Samuel J. Dixon, Monique M. Fitch, John I. Kershman, David G. Jones, Caroline Maisonneuve.

Paedodontists

Julia Rukavina, John R. Wiles, Robert J. Whyte, Peter L. Judd, Alan R. Milnes.

Orthodontists

Gordon R. Powell, Barbara A. Frackowiak, David E. Sylvester, Victor B. Griffiths, Clifford P. Singer, Leonard Chumak, Rodney M. Greenlaw, John I. Kershman, Eugene Kholov.

Oral and Maxillofacial Surgeons

David S. Precious, James M. Stone, Raymond J. Kanoza, David A. Walker, Gordon B. Wong, Harold A. Gretzinger, Stephen G.J. Fitch, Allan C-S. Moon.

Oral Pathologists

John Hardie, Larrv M. Goldstein.

Endodontists

Anne-Li Knuut, Jack G. Roskies, Michael J. Emon, Henry C-H. Yu.

Public Health Dentists

Mary E. Bullen, Thomas E.B. Balanyk, John L. Turner.

The following consultants advise the Committee in its deliberations concerning applications for specialty certification:

Specialty	Appointed by R.C.D.S.	Appointed by Specialty Group
Dental Public Health	Dr. Sam M. Green	Dr. James L. Leake
Endodontics	Dr. Joel J. Edelson	Dr. Michael S. Sherman
Oral Pathology	Dr. John A. Pedler	Dr. G.P. Wysocki
Oral Radiology	Dr. John A. Reid	Dr. S.M. Fireman
Oral and Maxillofacial Surgery	Dr. Edward M.G. Dore	Dr. Howard Chung
Orthodontics	Dr. W.D. Beaton	Dr. R. Bozek
Paedodontics	Dr. Keith R. Morley	Dr. F. Pulver
Periodontics	Dr. James Stakiw	Dr. H. Freedman

Prosthodontics Dr. Don R. Gratton Dr. Donald R. Kramer

On direction of Council, the major task of the Committee in 1985 was to review the current regulations as they pertain to Registration matters and recommend the appropriate changes necessary especially in light of a recent Divisional Court ruling.

As a result, the Committee put forward a number of recommendations and it is anticipated that Council will be deciding on the matter in the near future.

I shall highlight some of the main principles being proposed. Some will represent the continuance of existing "policy" while others represent a modification of the current regulations, and others indicate a considerably significant departure from the present regulation as you now have them.

1. Expand and modify the number of classes of Licences to encompass more appropriate categories i.e.— proposed classes of licence: 1) General; 2) Academic; 3) Graduate Student; 4) Hospital Practice; 5) Temporary; 6) Restricted — Specialty.
2. Continue to use the standard set by the National Dental Examining Board as one of the requirements for general licensure.

Note: After considerable debate and discussion with Dr. Ronald Jordan of the N.D.E.B., Council decided that there was no need for a special provincial licensing examination requirement at this time.

3. Continue to make one of the requirements for general licensure the fact that since graduation, no three-year period of time has passed in which the applicant has not engaged, on a continual and regular basis, in the practice of dentistry under the jurisdiction of a recognized dental licensing authority.
4. Allow the Registrar to automatically issue a general licence to the holder of an Academic Licence after a period of five years from the date of issuance.
5. Licence fees should be payable for any year in which the member has engaged or will engage in the practice of dentistry. If the licence is cancelled due to voluntary surrender or non-payment of the annual fee, a person may make application to have his/her licence re-issued upon fulfilling all requirements and payment of outstanding fees together with the appropriate penalty and/or administrative fee.
6. The class of specialists presently known as "Paedodontists" be changed to "Paediatric Dentists" and the branch of dentistry be changed to "Paediatric Dentistry".
7. Continue to include as one of the requirements for specialist certification the necessity that at least twelve months consecutive experience in the general practice of dentistry be completed before the commencement of specialist training in the branch of dentistry.
8. Delete the regulation that states that the applicant who is a holder of a Fellowship in The Royal College of Dentists of Canada is exempt from the requirement of having at least one year of general practice experience prior to the commencement of specialist training in the branch of dentistry.
9. Give consideration to making one of the requirements for specialist certification, the necessity for the applicant to have successfully passed an approved specialty examination.

Note: In November 1985, Council directed the Registration Committee to consult with the appropriate specialty groups on this matter and report back to Council in April 1986.

Thus, as you can see, there have been extensive discussions occurring at both the Committee and Council levels of the College regarding Registration matters.

Your comments are most welcome and any correspondence should be directed to the R.C.D.S. for the attention of the Registration Committee.

In conclusion, the Registration Committee, as a Statutory Committee defined under the Health Disciplines Act, carries considerable responsibility in the protection of the public interest in Ontario.

It has been a privilege and an honour serving on your behalf in 1985 and we look forward to a successful year in 1986.

Complaints

REPORT OF THE COMPLAINTS COMMITTEE

Chairman: W.R. Hilliard, D.D.S.

Committee Members: R.M. Matsui, D.D.S., Z.M. Dossett

For the calendar year 1985, the Complaints Committee met a total of 17 days. On a typical day, the Committee would interview six or seven people (either complainant or dentist or both — at separate times). We would as well, that day, review the file material including X-rays, models and records for about ten or twelve other cases, and make decisions on those cases whose investigations were since completed.

In total, this Committee has reviewed 269 complaints this year. Of these, 3 were referred to Discipline and many were dealt with by having the dentist in question take appropriate remedial steps, i.e.— courses for improvement in designated areas of his practice, refunds suggested, etc.

The Committee has many options, including the following:

1. dismiss the complaint as not having merit;
2. direct the College staff to gather more information before making a final decision;
3. caution the dentist to improve his performance or alter his conduct in some way;
4. suggest a way in which the dentist can make amends or perform services to satisfy the patient;
5. guide the dentist in question to take certain courses or remedial steps to correct his deficiencies;
6. recommend that the Registrar order a complete investigation of a member's practice and report the results to an appropriate Committee;
7. refer the matter to the Discipline Committee for a charge under the Health Discipline Act.

The Committee this year has tried, where appropriate, to use a remedial approach to problems as opposed to a disciplinary approach. We have found the majority of dentists very co-operative in this regard and most patients express positive feelings about the standards being improved and the public being protected as a result of this action.

The most common complaint categories are:

1. Inadequate Diagnosis or Failure to Diagnose Entirely
2. Failure to Treat or Failure to Treat Adequately
3. Treatment Fails in a Relatively Short Period of Time
4. Untoward Side Effects of Treatment
5. Advertising
6. Overcharging
7. Disputes Over Patient Files When Associateships or Partnerships Break Up.

Prevention of Problems

1. If in doubt as to what can and cannot be done regarding advertising, be sure to telephone the College for guidance.
2. It is essential to obtain legal advice when you are drafting your associateship or partnership agreements, **not** after a dispute starts.
3. Full and proper communication as in the old maxim, "Inform before you perform", could probably negate a large number of complaints. This is especially important when referring a patient to a specialist, since the referring dentist can be concurrently responsible for certain aspects of the patient's oral health and health maintenance while he

is attending the specialist for other treatment.

Health Discipline Board

During 1985, 38 Committee decisions were appealed to the Health Disciplines Board. In 15 instances the decisions of the Committee were upheld, 18 are still pending with the Board, 3 were returned to the Committee for further action (i.e.— cautioning and advising the dentist involved) and 2 were withdrawn by the complainants with the consent of the practitioners.

Acknowledgement

I wish to give my full thanks to Dr. Don McFarlane, Mrs. Gladys Holder and Gail Kemball for the competent way in which they assemble huge volumes of back-up material for our agendas.

A special thanks also to the other Committee members, Dr. Rollin Matsui and Mrs. Zeta Dossett for their hard work in preparing for meetings and positive attitude in trying to help both patient and dentist.

REPORT OF THE DISCIPLINE COMMITTEE

Chairman: R.L. Filion, D.D.S.

**Committee Members: R.M. Beyers, D.D.S.,
G.G. Grayson, D.D.S., R.T. Lang, D.D.S.,
G. Nikiforuk, D.D.S., W.H. Treleaven, D.D.S., J. Stefura,
E. Swadron, R. Donaldson***

The Discipline Committee is made up of eight members of the Council of the College. Two are lay members and six are dentists. It is the policy of the College to always endeavour to have five member panels for every disciplinary hearing.

Over the past year the previous and present Committee has met for a total of eighteen times. These meetings continue to be costly and account for a significant portion of the total operating budget of the College. I am happy to report, because of recent policy changes, which I am sure you will read about in the report of the Complaints Committee, that our docket has dropped to seven cases awaiting hearing. Some have been adjourned pending Judicial Review or Appeal. Hence, we believe that because of this new emphasis on rehabilitation at the Complaints level, we shall see a significant reduction in the total cost of administering Discipline. Penalties imposed by the Discipline Committee in the last few years have also taken a more rehabilitative stance because it is thought that there is much more to be gained by instituting measures which will produce a better dentist, than having someone simply serve a time of suspension and then return to practice in much the same condition as he or she was when removed from practice. In this way we believe that both the public and the member are better served.

Naturally, not all cases can be dealt with in this fashion but the Committee is convinced that cases such as poor records or inadequate or incomplete treatment should be looked upon as opportunities for remedial measures.

On one occasion the Committee saw evidence of what may be all too common in the practice of dentistry. The altering of insurance claim forms to provide service, which would not otherwise be covered, by falsely claiming for services which are covered, is looked upon by the College as fraudulent. The Committee feels in such circumstances where the member wishes to be charitable, he should do so with his own funds.

This year's Proceedings are historic in at least one sense because this is the last time the College publishes a complete report of the discipline hearings held during the past year in this format. In future issues of this publication, the reader will simply be cross-referenced to previous Dispatches of the College where these hearings have been published. There are two reasons for instituting this policy. Firstly, publication in the Proceedings often took as much as fourteen months to appear after a hearing. In even the most serious of penalties, by the time the report appeared in the Proceedings, that member had served his penalty and was, we would hope, well on his way to resuming a normal professional life, when the whole subject would be brought up again, this time before his colleagues. The member would literally have to relive the whole experience.

Secondly, if the charges which the Committee is called upon to deal with represent some new development in professional behaviour which the College considers professional miscon-

duct, then more timely publication of the decisions of the Discipline Committee about such behaviour might deter others who are contemplating such practices.

In conclusion, I would like to thank all concerned with the administration of the discipline at the College, the members of the Discipline Committee itself, counsel for both the College and the members who labour tirelessly in search of justice and the members of the senior staff of the College for their assistance and professionalism.

1.

A hearing was held on November 1, 1984 to hear into allegations of professional misconduct on the part of a member.

He pleaded 'not guilty' and was found 'not guilty' to a charge that he published, displayed, distributed or used or permitted, directly or indirectly the publishing, display, distribution or use of an article related to the practice of dentistry which article, including a photograph, appeared in a local newspaper on Wednesday, the 13th day of April, 1983 and which conduct or act, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.

2.

A hearing was held on November 6, 1984 to hear into allegations of professional misconduct on the part of:

Dr. Jean Bernard Larouche
2575 Innis Road
Ottawa, Ontario

Dr. Larouche pleaded 'not guilty' but was found 'guilty' to two charges alleging that he verbally and/or physically abused one of his patients and that he used a method and/or procedure involving the application of physical force to this patient without fully or adequately explaining the said method and/or procedure to the patient's parents.

Following deliberation and examination of the facts presented by both counsel, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register of this College.
2. That his licence to practice dentistry in Ontario be suspended for a period of two months.

The entire period of suspension shall be remitted based upon his signing of an undertaking that he would refrain from the use of excessive force in the course, the management and treatment of his patients.

3. There shall be publication of this proceeding in the normal course.

3.

A hearing was held on November 14, 1984 to hear into allegations of professional misconduct on the part of a member.

He pleaded 'not guilty' and was found 'not guilty' to the charge that he published, displayed, distributed or used or permitted, directly or indirectly, the publication, display, distribution or use of an advertisement related to the practice of dentistry in the Guia Commercial Portugues, other than permitted by the Act.

4.

A hearing was held on November 20, 1984 to hear into allegations of professional misconduct on the part of a member.

This matter is the subject of a Judicial Review and cannot be reported at this time.

5.

A hearing was held on November 27, 1984 to hear into allegations of professional misconduct on the part of:

Dr. Lorne J. Shankman
714 Dundas Street
London, Ontario

Dr. Shankman pleaded 'guilty' and was found 'guilty' to four charges. These alleged:

- a) That on the 6th of February, 1984 he was found guilty of an offence relevant to his suitability to practice dentistry, namely, that on or about the 22nd day of April, 1983 at the City of London, in the County of Middlesex, he did unlawfully have in his possession a narcotic, to wit: cocaine, contrary to The Narcotic Control Act.
- b) That on the 6th day of February, 1984 he was found guilty of an offence relevant to his suitability to practice dentistry, namely, that on or about the 23rd day of October, 1983, at the City of London, in the County of Middlesex, he did unlawfully have in his possession a narcotic, to wit: cocaine, contrary to The Narcotic Control Act.
- c) That on or about the 22nd day of April, 1983 he did have in his possession a narcotic or narcotics, namely, cocaine and/or marijuana, which constitutes conduct or an act relevant to the practice of dentistry that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.
- d) That on or about the 23rd day of October, 1983 he did have in his possession a narcotic namely, cocaine, which constitutes conduct or an act relevant to the practice of dentistry that, having regard to all of the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.

Following deliberation and examination of the facts presented by both counsel the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register of the College.
2. That his licence to practice dentistry shall be restricted such that he shall not have the right to prescribe any control or narcotic drugs until such time as a Discipline Committee of the College shall approve the removal of this restriction and in any event for a minimum period of three years from the date hereof.
3. That his licence to practice dentistry shall be suspended for a period of three and one half years, to commence on December 15, 1984 provided that upon his fulfilling all of the following conditions the suspension shall be stayed. The conditions are as follows:
 - a) He shall serve the first two and one half months of such suspension, commencing December 15, 1984.
 - b) He write to the Bureau of Dangerous Drugs with a copy

to the College asking that his right to prescribe narcotic or control drugs be removed until such time as he could obtain the approval of a Discipline Committee of the College to the reinstatement of said right and in any event for a minimum period of three years from the date hereof.

- c) That he voluntarily enter the Drug Rehabilitation Program at the Donwood Institute.
 - d) That he execute and deliver to the College an undertaking in a form satisfactory to the College which provides that, for a period of five years he shall:
 - (i) refrain from the personal use of all prescription, narcotic or control drugs except pursuant to a prescription provided by a duly qualified and licensed practitioner (medical or dental);
 - (ii) obtain and continue to obtain drug rehabilitation treatment from the Donwood Institute or such other institution approved by a Discipline Committee of the College until such time as the Discipline Committee of the College is satisfied that such treatment is no longer required;
 - (iii) during the period of time set out in subparagraph (ii) hereof, provide the College, at his own expense, with quarter-yearly reports from the psychiatrist, psychologist or physician in charge of his treatment as approved by the Donwood Institute advising of the status of his treatment as well as such other information as the Registrar of the College may ask said psychiatrist, psychologist or physician to provide;
 - (iv) provide immediately, at such time or times as the Registrar of the College or his duly authorized agent(s) may request, blood and/or urine samples for analysis;
 - (v) not associate with persons known by him to be users or traffickers of narcotic or control drugs;
 - (vi) not be convicted of any offences based upon the use, misuse or possession of any drug and without limiting the generality of the foregoing, not be convicted of any offence under the Narcotic Control Act as it presently exists or as it may be amended or substituted for from time to time; and
 - (vii) provide such other information as the College may require to ensure that compliance with the undertaking has been made.
4. In the event that the conditions set out in paragraph 3. hereof are fulfilled, then the balance of the suspension shall be stayed. If after five years from the commencement of the stay he has fulfilled all of the terms of the undertaking, the balance of the suspension shall be remitted. If during that five year period he breaches any of the terms of the undertaking as may be determined by a Discipline Committee, in addition to whatever other repercussions which may result including further disciplinary proceedings and/or court proceedings, the stay of the suspension hereinbefore referred to shall end and he shall serve the remainder of said suspension.
5. There shall be publication of this proceeding in the normal course including publication of his name and address.

6.

A hearing was held on December 7, 1984 to hear into allegations of professional misconduct on the part of:

Dr. John L. Rogers
60 Hillside Ave. N.
Elliot Lake, Ontario

Dr. Rogers pleaded 'not guilty' but was found 'guilty' to the charge that he published, displayed, distributed or uses or permitted, directly or indirectly, the publishing, display, distribution or use of an advertisement related to the practice of dentistry which advertisement appeared in the Sault Star on Monday, November 15, 1982 and which advertisement exceeded 5 cm. in depth including the margins.

Following deliberation and examination of the facts presented by both counsel, the Discipline Committee assessed the following penalty:

1. That he be reprimanded and the fact of the reprimand be recorded on the Register of the College.
2. That there be publication of this proceeding in the normal course.

7.

A hearing was held on February 19, 1985 to hear into allegations of professional misconduct on the part of a member.

He pleaded 'guilty' and was found 'guilty' to charges alleging that he conducted himself or committed an act or acts relevant to the practice of dentistry that, having regard to all the circumstance, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional in that during the years 1982 and/or 1983 he knowingly submitted a false or misleading account or accounts or charges to third party insurers for services rendered to certain of his patients who were also covered by a government subsidized dental program.

Following deliberation and examination of the facts presented by both counsel the Discipline Committee assessed the following penalty:

1. That his licence to practice dentistry be suspended for a period of six months commencing on the 1st day of May, 1985
2. The said suspension shall be rescinded conditional upon his fulfilling the following conditions:
 - a) on or before the 1st day of May, 1985 he co-operate with the College and produce to the College and its counsel all documentation in his possession or control, which would assist in determining to whom and to what extent monies have been received by him from third party insurance carriers for treatment provided by him during the years 1982 and 1983, when he was specifically engaged by a health unit and
 - b) he repay the sums determined in paragraph 2a) hereof to the third party insurance carriers on or before the 1st day of May, 1985.
3. That he be fined \$2,500.00 and such shall be sent to the College for forwarding to the Treasurer of Ontario for payment into the Consolidated Revenue Fund on or before the 1st day of May, 1985.
4. That he is to be reprimanded and the fact of the reprimand be recorded on the Register of this College.

5. That publication of this proceeding shall be made in the usual fashion but with the name and address of the member deleted.

8.

A hearing was held on March 4, 1985 to hear into allegations of professional misconduct on the part of a member.

He pleaded 'guilty' and was found 'guilty' to five charges alleging:

- a) That he failed to maintain any or adequate clinical records respecting fourteen patients from the years 1975 to 1983.
- b) That he failed to maintain the standards of practice of the profession in respect of his treatment of some or all of thirteen patients, in particular, that he failed to take any or an adequate medical history for all or some of these patients from 1975 to 1983
- c) That he failed to maintain the standards of practice of the profession in respect of his treatment of some or all of eight patients and in particular failed to treat or cause to be treated, adequately or at all certain matters with respect to those patients.
- d) That he failed to maintain the standards of practice of the profession and in particular failed to take any or adequate x-rays of two patients.
- e) That he charged fees which were excessive or unreasonable in relation to services performed to one or more of fourteen patients.

Following deliberation and examination of the facts presented by both counsel the Discipline Committee assessed the following penalty:

1. That his licence to practice dentistry be suspended for a period of nine months starting immediately.
2. During the first three months of the suspension he must complete the following programs:
 - a) A continuing education program in Periodontics at the University of Toronto.
 - b) A course on Restorative Dentistry: Current Concepts for the General Practitioner in the 80's at the University of Toronto.
 - c) A course on Crown and Bridge at the University of Toronto.
3. After a period of three months, and after completion of the above programs the suspension is lifted subject to #4.
4. That he is to complete the special course in Oral Diagnosis, Radiology and Treatment Planning at the University of Toronto.
5. That he be reprimanded and the fact of such a reprimand be recorded on the Register of the College.
6. Publication of the decision of the Discipline Committee shall be made in the normal course. Publication of his name and address will be withheld subject to receipt of a physician's report indicating that publication would compromise his health.

Subsequent to the receipt of a physician's report, the Discipline Committee directed that the member's name not be published.

9.

A hearing was held on March 25, 1985 to hear into allegations of professional misconduct on the part of:

Dr. C. Clare Woods
136 Ware Street
Peterborough, Ontario

Dr. Woods pleaded 'guilty' and was found 'guilty' to charges alleging that he failed to maintain the standards of practice of the profession relative to the administration of drugs to one of his patients and that he failed to meet the standards of practice of the profession in relation to his treatment of one of his patients in that he failed to follow or abide by the instruction of her physician relative to the administration of drugs to her.

Following deliberation and examination of the facts presented by both counsel the Discipline Committee assessed the following penalty:

1. That his licence to practice dentistry be suspended for a period of two months commencing on the 10th day of May, 1985.
 2. That Dr. Woods undertake, in writing, to cease and desist, immediately, from administering any intravenous sedation or general anaesthesia (as defined in the Royal College of Dental Surgeons of Ontario Guidelines of December, 1983) unless and until he successfully complies with all of the requirements relative to the utilization of intravenous sedation and general anaesthesia as set out in the said Guidelines. The training requirements set out in the said Guidelines shall be undertaken and completed subsequent to this date. Prior to undertaking such course or courses, the approval of the College as to the acceptability of such course shall be obtained.
 3. Pending compliance with paragraph 2. hereof, Dr. Woods undertakes to cause intravenous sedation or general anaesthesia to be administered only by a qualified physician or a dental practitioner qualified to do so in accordance with the terms of the said Guidelines.
 4. There shall be publication in the usual course.
 5. That a reprimand be given to Dr. Woods and that such a reprimand be entered in his personal record.
- He entered a plea of guilty respecting allegations of:

10.

A hearing was held on May 6, 1985 to hear into allegations of professional misconduct on the part of a member.

He entered a plea of guilty respecting allegations of:

1. a failure to maintain any or adequate clinical records; the failure included the lack of a proper updated medical history, a failure to record carious lesions and restorations or periodontal conditions, a failure to record the type and quantity of local anaesthetic used or the material used in root canal obliteration, x-rays recorded as having been taken were missing;
2. a failure to take any or adequate x-rays; particularly with reference to root canal treatment, and prior to extractions, many x-rays were of insufficient diagnostic value such as bite wings that did not show the crowns of maxillary teeth and periapicals that failed to show the apices of teeth;
3. a failure to treat adequately or at all; the case of seven

restorations placed on one tooth in a six year period, and a poorly fitting crown placed on another tooth; and

4. excessive or unreasonable fees; he admitted to charging for specific area examinations in circumstances where a recall examination was appropriate.

The Committee, having listened to the submissions, and reviewed an undertaking signed by the member, accepted the undertaking and dismissed the charges.

It was the committee's opinion that although technically guilty of the allegations, these did not, under the circumstances, constitute professional misconduct.

The member undertook to register for a course of retraining approved by the College and to permit inspections of his practice over a two year period.

The Discipline Committee's decision was based on their opinion that the allegations to which the member had pleaded guilty did not constitute professional misconduct.

11.

A hearing was held on May 22, 1985 to hear into allegations of professional misconduct on the part of:

Dr. A. Gordon Brown
4886 Dundas St. West
Islington, Ontario

Following the withdrawal of seven allegations by the College Dr. Brown pleaded guilty to seventeen allegations.

These included:

1. a failure to maintain adequate clinical and financial records for several of his patients, e.g.— x-rays recorded as having been taken were missing; the lack of adequate and/or updated medical histories;
2. the charging of fees that were excessive and/or unreasonable in respect of services allegedly performed for several of his patients, e.g.— the fee charged for initial examinations when the criteria for such a fee were not met; charging for prescribing of analgesics for post-operative care; the charging for the finishing of restorations; the charging for the insertion of treatment crowns; the fee charged for placing a lining under a restoration; the fees charged for root canal treatment; the fees charged for prophylaxis; etc.;
3. the charging of fees for services not performed for several of his patients, e.g.— the charging for a full mouth series of x-rays when only nine or thirteen periapicals were taken, no bite wings; the charging to an insurance company for fillings when crowns were being prepared; and
4. the failure to meet the standards of practice of the profession relative to treatment rendered several of his patients, e.g.— failed to take an adequate medical history prior to administering an anaesthetic, extracting teeth or prescribing medication; diagnostic, treatment plan and treatment was inadequate; root canal treatment was inadequate; periodontal treatment was inadequate.

Dr. Brown was found guilty of the allegations to which he pleaded guilty and was assessed the following penalty:

- a) His licence to practice to be suspended for a period of six months. Such a suspension to begin August 1, 1985 and to be remitted upon compliance with the following terms:
 - (i) to take a course within a year, approved by the Col-

- lege, in Oral Diagnosis and Treatment Planning.
- (ii) to refrain from engaging in multiple abutment crown and bridge cases which involve a change in vertical dimension.
 - (iii) to agree to refund \$7,500.00 to one of his patients.
 - (iv) to agree to inspection of his practice, on a random basis, once during the next year.
- b) To be reprimanded and such reprimand to be recorded in the Register.
 - c) Proceeding to be published in the normal course.

12.

A hearing of the Discipline Committee was held on June 2, 1985 to consider a negotiated settlement between the College and a member whereby the R.C.D.S. would withdraw its allegations of professional misconduct in exchange for an undertaking by the member.

The allegations pertained to:

- a) the submitting of claims to an insurance company wherein the fees charged were excessive and/or unreasonable in relation to services performed for thirty-three of his patients;
- b) the submitting of false or misleading accounts or charges to an insurance company for services rendered to one or more of thirty-three of his patients; and
- c) the submitting of claims to an insurance company for fees for services not performed for one or more of thirty-three of his patients.

In the undertaking the member agreed to:

- 1. charge all future subgingival curettage under Code 43400 and not 42001 as done previously;
- 2. repay the insurance company a sum to be mutually agreed upon in respect to all treatments for which claims had been submitted; and
- 3. immediately reimburse the sum of \$5,800.00 as payment on account until Part 2. was resolved.

The Committee, after deliberating, reached the following decision:

- a) They agreed with the withdrawal of the charges against the member.
- b) Hoped that the member would resolve his accounting differences with the Prudential Insurance Company of America.
- c) Under Section 37(6) of the Health Disciplines Act, the Committee ordered that the R.C.D.S. reimburse the member for his legal costs.

The Discipline Committee's decision was based on the stated opinion of the insurance company involved that there was no malintent on the part of the members involved but rather a misunderstanding of the fee guide.

13.

An open hearing was held on June 10 and 11, 1985 to hear into allegations of professional misconduct against:

Dr. Angus Blair
299 St. George St. West
Fergus, Ontario

Dr. Blair pleaded not guilty to fifteen allegations. He was

found guilty to six allegations that be:

- a) failed to maintain any or adequate clinical records relative to any or all of four patients;
- b) failed to take any or adequate medical histories relative to any or all of four patients;
- c) improperly and/or inadequately performed fissure eradication(s) on one or more of eight patients; and
- d) on three different occasions did directly or indirectly publish or display or distribute or use an advertisement related to the practice of dentistry contrary to the Regulations.

After deliberation the Discipline Committee assessed the following penalty:

- 1. That his licence to practice be suspended for six months, and that five be remitted upon the following conditions:
 - (i) that he successfully complete a course in Oral Diagnosis and Treatment Planning;
 - (ii) that he advertise only in compliance with the Health Disciplines Act and its Regulations; and
 - (iii) that he agree to periodic inspections of his practice.
- 2. That his licence to practice be subject to the following restrictions, i.e.— that he not perform any form of fissure eradication or any similar procedure.
- 3. That there be publication of the proceeding in the usual course.
- 4. That he be reprimanded.

14.

A hearing was held on August 2, 1985 to hear into allegations of professional misconduct on the part of:

Dr. Robert G. Walthers
207 - 630 Tecumseh Blvd. East
Windsor, Ontario

Dr. Walthers pleaded guilty to allegations that he allowed his hygienist to engage in the practice of dentistry unsupervised by a member of the R.C.D.S.

The Committee accepted Dr. Walthers' guilty plea to the charges and after deliberation assessed the following penalty:

- 1. That he be fined \$2,500.00.
- 2. That there be publication of the proceeding in the usual course.
- 3. That he be reprimanded.

15.

A hearing was held on September 10, 1985 to hear into allegations of professional misconduct on the part of a member.

Four of the seven allegations of professional misconduct were withdrawn by the R.C.D.S. The member pleaded "guilty" to two of the three charges remaining and "not guilty" to the third.

After deliberation the Committee found him "not guilty" of the one charge and accepted his guilty plea to allegations that:

- a) he permitted a person or persons not licenced or authorized under the Act to engage in the practice of dentistry, e.g.— taking impressions for study models and the placing of fluoride trays; and
- b) he failed to maintain any or adequate clinical records

respecting several of his patients.

Subsequent to deliberation the Committee assessed the following penalty:

1. That he be reprimanded.
2. That there be publication of this proceeding with the member's name and address deleted.

16.

A hearing was held on September 11, 1985 to hear into allegations of professional misconduct on the part of a member.

The member pleaded guilty to six of eight allegations of professional misconduct. Two charges were withdrawn by the College.

After deliberation the Committee accepted a guilty plea to allegations that he:

- a) permitted a person or persons not licenced or authorized under the Act to engage in the practice of dentistry, i.e.— dental assistants were allowed to take impressions for study models and the placing of fluoride trays;
- b) failed to maintain any or adequate clinical records relative to one or more of sixteen patients.
- c) charged fees that were excessive or unreasonable in relation to services performed for one or more of fifteen patients, e.g.— charging for difficult extraction when extraction was routine; charging for initial examination when criteria for such was not met; charging for full mouth series of x-rays when such were not present, etc.;
- d) failed to take any or adequate x-rays with respect to certain treatment, e.g.— x-rays taken prior to extractions did not show all of the root of teeth to be extracted;
- e) performed unnecessary dental treatment on one or more of six patients; and
- f) failed to treat or cause to be treated adequately or at all one or more of eight patients, e.g.— root canal treatment was inadequate.

After deliberation the following penalty was assessed:

1. That he be fined \$1,000.00.
2. That his licence to practice be suspended for four months with:
 - (i) two months remitted on condition that he successfully complete courses in Oral Diagnosis, Radiology and Endodontics; and
 - (ii) two months remitted on condition that he agree to have his practice monitored by the College for a period of two years.
3. That he be reprimanded.
4. That this hearing be published in the annual Proceedings with the name and address of the member deleted.

17.

A hearing was held on September 18, 1985 to hear into allegations of professional misconduct on the part of a member.

The member pleaded guilty to five charges of professional misconduct. Three charges were withdrawn by the R.C.D.S. The Discipline Committee accepted the guilty plea to allegations that:

- a) he knowingly submitted false or misleading accounts rendered to one or more of twenty-three patients, e.g.— charged for x-rays not taken, charged for scaling

and root planing not performed;

- b) he charged fees that were excessive or unreasonable in relation to services performed for one or more of eleven patients, e.g.— fees charged for the extraction of deciduous teeth, charging a separate fee for x-rays taken in conjunction with root canal therapy;
- c) he failed to maintain any or adequate clinical records in relation to services performed for one or more of thirty-eight patients, e.g.— x-rays recorded as having been taken were missing;
- d) he failed to take any or an adequate medical history preliminary to treatment performed for one or more of thirty-two patients, e.g.— prior to extractions, scaling and root planing, root canal therapy and general dentistry; and
- e) he failed to take any or adequate x-rays with respect to treatment performed for one or more of eight patients, e.g.— prior to extractions, crown construction and fixed bridges.

Subsequent to deliberation, the Committee assessed the following penalty:

1. That he be fined \$4,000.00
2. That his licence to practice be suspended for a period of six months, such suspension to be remitted on the following conditions:
 - (i) two months to be remitted on successful completion of a course in Oral Diagnosis and Radiology;
 - (ii) two months to be remitted on immediate restitution to an insurer of the amount of \$2,000.00; and
 - (iii) two months remitted on condition that his practice be monitored for a period of one year.
3. That he be reprimanded.
4. That there be publication with the name and address of the member deleted.

18.

A hearing of the Discipline Committee was held on November 22, 1985 to hear into four allegations of professional misconduct on the part of:

Dr. B.G. McGuire
3310 McCarthy Road
Ottawa, Ontario

The member pleaded guilty to allegations that he extracted certain teeth contrary to the instructions of the referring dentist; that he performed treatment on a patient that was unnecessary or inadvisable and that he performed treatment on a minor without parental consent.

The Committee directed that he be reprimanded and the fact of the reprimand be made part of his record and that this proceeding be published in the normal course.

19.

A hearing of the Discipline Committee was held on December 11, 1985 to hear into six allegations of professional misconduct on the part of:

Dr. Kenneth S. Kay
214 - 40 Peel Centre Drive
Bramalea, Ontario

Dr. Kay pleaded not guilty to all charges. He was found

guilty with respect to two allegations of submitting claims to each of two Assurance Companies respecting each of two patients wherein he charged fees that were excessive and/or unreasonable in relation to the services allegedly performed.

The penalty assessed was that:

1. He be reprimanded and the reprimand recorded.
2. He be fined \$1,000.00.
3. There be publication in the usual course.

20.

A hearing of the Discipline Committee was held on December 17, 1985 to hear into two allegations of professional misconduct on the part of:

Dr. Christos Tasios
2085 Lawrence Ave. East
Scarborough, Ontario

Dr. Tasios pleaded guilty to the allegation that he knowingly submitted a false or misleading account or accounts respecting one of his patients relative to services purportedly rendered.

The second charge was withdrawn by the College.

The penalty assessed was that:

1. He be reprimanded and the reprimand recorded.
2. He be fined \$1,000.00.
3. There be publication in the usual course.

Education

REPORT OF THE EDUCATION COMMITTEE

Chairman: W.H. Trealeven, D.D.S.

Committee Members: R.M. Beyers, D.D.S.,
G.G. Grayson, D.D.S., J. Stefura, R. Donaldson

CONTINUING EDUCATION

Continuing Education programs were offered to all Local Dental and Dental Hygiene Component Societies throughout the province. Each society has the opportunity of organizing two one-day sessions and one two-day session per year. The latter may be substituted with a participation course and a \$500.00 grant in lieu of the normal financial arrangements. A list of the 1985 programs follows this report.

A refresher course for dental hygienists co-sponsored by George Brown College and the R.C.D.S. was held in July, 1985. To date, 4 remedial courses for dentists referred by the Discipline Committee or recommended by other committees, have been conducted at the University of Toronto. The courses include record-keeping, diagnosis, treatment planning and radiography. The courses are 9 days in length with an enrollment of 8 members. The registration fee is \$1,600.00 each, payable to the College. Also, refresher courses in oral diagnosis and treatment planning have been scheduled at the University of Western Ontario during the spring and fall of 1986.

The College has recently obtained 20 videotapes (VHS) from the American Dental Association. While permission had not been given to copy the videotapes for our library service, we are prepared to lend them to local dental and dental hygienists' societies for use at evening meetings.

The R.C.D.S. has provided 10 X-Ray Safety Courses throughout the province and has qualified approximately 300 dental assistants. The Healing Arts Radiation Protection Commission has agreed to allow the College to conduct additional courses until the back-log has been cleared up.

Finally, the Committee will be reviewing the overall finances of conducting the Continuing Education Programs to possibly pass more of the financial responsibility on to the local societies, thus relieving the College of unnecessary paperwork.

DENTAL HYGIENE

Due to the strike by Community College teachers during the fall of 1984, the dental hygiene licensing examination schedule extended from May 6 until June 25.

Of the 183 Community College candidates who tried the clinical licensing examination, 34, or 19%, were unsuccessful. However, all but 4 candidates passed the supplemental examination. These candidates have the opportunity to try another examination after completing appropriate remedial training.

Once again, all graduates of the Expanded Duty Dental Hygiene Program at George Brown College were successful on the qualifying examination conducted by the R.C.D.S.

The possibility of pursuing a two-year dental hygiene program separate from dental assisting is still under study.

ACKNOWLEDGEMENTS

I sincerely thank the members of the Education Committee for their valuable contribution to the affairs of the Committee, as well as Dr. Don McFarlane and Mrs. Linda Strevens for their support.

CONTINUING EDUCATION PROGRAMS — DENTISTS

Bay of Quinte Dental Society

Friday, October 25, 1985

Jack Gryfe, D.D.S.

"Surgery You Can and Should Do in Your Office"

Brockville Dental Society

Friday, January 25, 1985

Howard M. Stein, D.D.S.

"Practice of Paediatric Preventive Dentistry and Behaviour Management of the Child Patient"

Cornwall Dental Society

Wednesday, March 20, 1985

Donald Kepron, D.D.S.

"Crown and Bridge/Fixed and Removable Prosthodontics"

Thursday, May 9, 1985

Dorothy McComb, D.D.S.

"Current Aesthetic Restorative Material and Their Clinical Uses"

Wednesday, November 13, 1985

Paul S. Sills, D.D.S.

"Current Concepts in Removable Partial Denture Therapy"

Durham Dental Society

Friday, January 25, Saturday, January 26, 1985

Dennis Skinner, D.D.S.

Makoto Suzuki, D.D.S.

"Restorative Dentistry and Endodontics for the General Practitioner"

Friday, November 22, 1985

Barry Singerman, D.D.S.

"System of Easier Endodontics — Warm Gutta Percha — Vertical Compaction"

Elgin County Dental Society

Thursday, April 25, 1985

Donald R. Gratton, D.D.S.

"Quality Crown and Bridge/Occlusion and Articulation/Electrosurgery/Cast Etch Bridges"

Haldimand-Norfolk Dental Society

Wednesday, March 13, 1985

Wayne H. Pulver, D.D.S.

"Contemporary Endodontics"

Kenora-Rainy River Dental Society

Friday, October 25,

Saturday, October 26, 1985

Marshall Peikoff, D.D.S.

"Endodontics"

Kent County Dental Society

Friday, March 8, 1985

Philip A. Watson, D.D.S.

"Pontic Form in Crown and Bridge Treatment and Biologic Considerations"

Kirkland Lake Dental Society

Friday, May 3, 1985

W. Stuart Hunter, D.D.S.

"What's New in Orthodontics?"

Friday, November 8, 1985

Mel Hawkins, D.D.S.

"Confident Pain Control and Dental Emergency Management"

Lambton County Dental Society

Wednesday, March 27, 1985

Len Boksmann, D.D.S.

"Posterior Composites, Dentinal Bonding, Glass Ionomer Cements, and New Veneering Systems"

Friday, May 3, 1985

Barry Singerman, D.D.S.

"System of Easier Endodontics — Warm Gutta Percha — Vertical Compaction"

Peterborough Dental Society

Friday, March 29, 1985

William Gray, D.D.S.

"Crown and Bridge"

Friday, November 1

Saturday, November 2, 1985

Donald R. Gratton, D.D.S.

Paul S. Sills

"Treatment of the Partially Edentulous Patient: Fixed and Removable"

Procupine Dental Society

Friday, November 8, 1985

William Hettenhausen, D.D.S.

"Your Teeth For A Lifetime — Nutrition For All Ages"

Renfrew County Dental Society

Friday, October 25, 1985

Lawrence C.R. St. Pierre, D.D.S.

"Crown and Bridge for the General Practitioner"

Rideau Dental Society

Monday, April 22, 1985

Ross O. Fisk, D.D.S.

"Orthodontic Bonding and Bracketing to Removable Appliances and Simple Fixed Bonding"

Monday, November 11, 1985

Simon Weinberg, D.D.S.

"Pharmacotherapeutics in Oral Surgery; Emergencies in the Dental Office; Management of Compromised Patients"

Sault Ste. Marie Dental Society

Friday, April 26, 1985

Barry Singerman, D.D.S.

"Practical Endodontics"

Stratford Dental Society

Friday, March 15, 1985

John A. Pedler, D.D.S.

"Current Concepts in Oral Pathology"

Friday, June 21, 1985

Herbert J. Adirim, D.D.S.

"Non-Traditional Dental Care"

Friday, September 13, 1985

W. Ross Barlow, D.D.S.

"X-Ray Safety"

Wednesday, November 20, 1985

Barry Korzen, D.D.S.

"Contemporary Endodontics"

Sudbury and District Dental Society

Friday, January 18, 1985

Thomas D. Daley, D.D.S.

"Current Topics in Oral Pathology and Clinical-Pathological Correlation of Common Oral Lesions"

Friday, March 22, 1985

John Schaman, D.D.S.

"Fitness for the Dentist and Medicine as it Applies to the Dental Practice"

Wingham Dental Society

Wednesday, April 17, 1985

William K. Hettenhausen, D.D.S.

"Preventive Techniques and Nutrition for All Ages"

York Dental Society

Friday, January 11,

Saturday, January 12, 1985

J. Douglas Awde, D.D.S.

Donald R. Gratton, D.D.S.

"Perio-Restorative Interaction & Related Aspects of Diagnosis, Treatment Planning and Therapy"

Friday, April 19, 1985

Gerald Pearson, D.D.S.

"Periodontal Potpourri"

Friday, December 6, 1985

Peter Yaman, D.D.S.

"Esthetic Restorative Dentistry"

CONTINUING EDUCATION PROGRAMS — DENTAL HYGIENISTS

Algoma Dental Hygienists' Association

Saturday, April 20, 1985

William J. Fleming, D.D.S.

"The Practice of Preventive Dentistry"

Durham Dental Hygienists' Association

Saturday, March 9, 1985

Gerald Z. Wright, D.D.S.

"Managing Children in the Dental Office"

Saturday, November 9, 1985

Jenny Thomas, Dip. Dent. Hyg.

"The Oral Care of Special Patients"

Halton Peel Dental Hygienists' Association

Saturday, February 2, 1985

William K. Hettenhausen, D.D.S.

"Generating Health in the Oral Environment"

Saturday, October 5, 1985

Charles O. Munroe, D.D.S.

"Oral Diagnosis — Treatment Planning in the Presence of More Common Systemic Diseases"

Hamilton and District Hygienists' Association

Saturday, February 16, 1985

Jenny Thomas, Dip. Dent. Hyg.

"Oral Care of Patients with Special Needs"

Saturday, October 26, 1985

John Jenkins, D.D.S.

"The Use of Functional Removable Appliances in the Correction of Class II Malocclusions"

Kingston Dental Hygienists' Association

Saturday, February 16, 1985

William K. Hettenhausen, D.D.S.

"Your Teeth for a Lifetime — Nutrition for All Ages"

London Dental Hygienists' Association

Saturday, March 2, 1985

Jenny Thomas, Dip. Dent. Hyg.

"The Utilization of the Dental Hygienist in

Private Practice with Emphasis on Periodontal Skills"

Niagara Region Dental Hygienists' Association

Saturday, November 23, 1985

John Schaman, D.D.S.

"Cardiovascular Fitness and Sports Medicine/
Cardiovascular Rehabilitation"

Northwestern Hygienists' Association

Saturday, May 4, 1985

George Burgman, D.D.S.

"Forensic Odontology"

Saturday, October 26, 1985

Martin Tyler, D.D.S.

"Oral Diagnosis/Oral Medicine for Dental Hygienists"

Ottawa Dental Hygienists' Association

Saturday, February 23, 1985

Murray L. Arlin, D.D.S.

"What's New in Periodontics"

Saturday, November 2, 1985

Beverly Musten, D.D.S.

"Nutrition: Who Cares? — Everybody"

Peterborough Dental Hygienists' Association

Saturday, April 27, 1985

Jenny Thomas, Dip. Dent. Hyg.

"The Utilization of the Dental Hygienist in

Private Practice with Emphasis on Periodontal Skills"

Sarnia-Lambton Hygienists' Association

Saturday, March 30, 1985

Thomas Daley, D.D.S.

"Current Topics in Oral Pathology and
Common Oral Diseases"

Saturday, November 2, 1985

Paul Stebbons, D.D.S.

"Stress Communications and Assertiveness"

Sudbury Hygienists' Association

Saturday, April 27, 1985

David Glick, D.D.S.

"Periodontal Diagnosis and Treatment for the Hygienist"

Thunder Bay Hygienists' Association

Saturday, March 2, 1985

Larry Williams, D.D.S.

"Human and Primate Evolution Re:

Dentition in Regards to Food Processing"

Toronto Central Hygienists' Association

Saturday, February 9, 1985

Marietta Alibranti, D.D.S.

"Radiation Protection"

Saturday, April 20, 1985

Thomas D. Daley, D.D.S.

"Common Oral Diseases"

Saturday, November 9, 1985

Barry Rubinoff, D.D.S.

"Nutritional Counselling — Its Importance in
Prevention and Treatment"

Toronto North Hygienists' Association

Saturday, January 19, 1985

David Mock, D.D.S.

"Current Concepts in Oral Medicine and Pathology"

Saturday, March 16, 1985

Jon Perlus, D.D.S.

"Perio-Endo Problems — Periodontal Therapy Rationale —
Periodontosis"

Saturday, October 26, 1985

George Burgman, D.D.S.

"Forensic Odontology"

Waterloo-Wellington Hygienists' Association

Friday, March 22, 1985

Evelyn I. Bird, D.D.S.

"T.M.J. and Bruxing Dysfunction and Relaxation/
Biofeedback Therapy"

Windsor-Essex Hygienists' Association

Saturday, February 16, 1985

Thomas D. Daley, D.D.S.

"Current Topics in Oral Pathology and Clinical-Pathological
Correlation of Common Oral Lesions"

Saturday, November 23, 1985

Jenny Thomas, Dip. Dent. Hyg.

"The Utilization of Dental Hygienists in

Private Practice with Emphasis on Periodontal Skills"

Finance

REPORT OF THE FINANCE AND PROPERTY COMMITTEE

Chairman: W.R. Patrick, D.D.S.

Committee Members: R.M. Beyers, D.D.S., R.L.J. Filion, D.D.S., R.T. Lang, D.D.S., Rev. R.P. Thomas, L.L. Mickelson

GENERAL COMMENTS

The Finance and Property Committee met twice prior to the Spring Council meeting. The first meeting was an introductory meeting to provide background information and orientation to the new members of the Committee. There was discussion regarding future accommodations and a tour of the R.C.D.S. building was conducted to familiarize the Committee with the existing facility. In view of the findings, it was recommended that future funding of the Building Fund in the 1986 Budget be suspended. Previous budgets were reviewed and a meeting with the Auditors was held to discuss the 1984 Financial Statements.

As a result of these deliberations and our concern regarding the deficits which had occurred in previous years, it was the recommendation of this Committee that Council exercise great care in expenditures for 1985 and that the budget for 1986 should show a positive balance.

INCOME

a) Fees and Registration — Dentists

Dentists 5,450 @ \$550.	\$2,997,500.
Registration Fee 129 @ \$100.	12,900.
Total	3,010,400.
Less P.L.I. Premium 5,450 @ \$265.	1,444,250.
	\$1,566,150.

b) Fees and Registration — Hygienists

Hygienists 2,760 @ \$100.	\$ 276,000.
Registration Fee 201 @ \$25.	5,025.
Total	\$ 281,025.

c) Examination Fees — Hygienists

This item includes income from general licensing examinations, supplemental examinations and expanded duty examinations.

d) Interest

Interest is derived from our investments. It is difficult to estimate future interest rates.

e) Property Rent

Rent from the caretaker's apartment.

f) Sundry

Income from the sale of membership lists, etc.

g) Continuing Education

Increased because the fees for courses have been increased from \$35. to \$50.

h) Administration Charge — Professional Liability Insurance

This is the charge paid to the College from the P.L.I. fund for

the day-to-day administration of the plan. It is increased to more accurately reflect the true cost of salaries and materials.

EXPENSES

i) Salaries and Charges

This represents an increase of 5% to 6%. However, all salaries were reviewed and merit increases were awarded in some instances.

j) Postage

This item remains the same as last year.

k) Printing, Stationery & Supplies

This item remains the same as last year.

l) Telephone

Telephone rates are expected to increase this year.

m) Equipment

This item includes the purchase of a word processor, rental and maintenance of equipment, computer programming and micro filming.

n) Property Expenses

This item covers taxes, insurance and maintenance and repairs and reflects a normal increase.

o) Staff Travel

This decrease reflects actual costs for car rental, repairs and insurance.

p) Examinations

Cost of administering Dental Hygiene examinations.

q) Council Honoraria

Honoraria paid to Council members for attending meetings. Includes non-members of Council who are members of Ad Hoc Committees.

r) Continuing Education

Honoraria and expenses for lectures and meals for all participants.

s) Professional Fees

This item is mainly legal fees and an anticipated audit increase.

t) Witness Fees and Court Reporters

Money paid to witnesses for Discipline hearings.

u) Council Insurance

This is accident insurance to cover members of Council and clinicians who might be injured or killed while on College business.

v) Council and Committee Expenses

This is the cost of travel and accommodation for members of Council on College business.

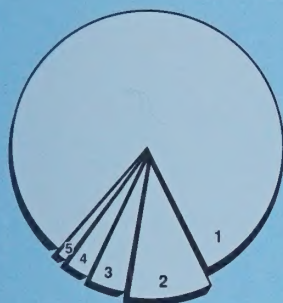
w) Grants

Grants to the Universities for various scholarship funds.

x) Administration Expenses

y) Building Fund

**1986
BUDGET INCOME
(Total \$2,063,275)**



1. Fees – Dentists
(less P.L.I. Premium)
2. Fees – Dental Hygienists
3. Examination Fees and
Contingency Education
4. P.L.I. Administration Fee
5. Interest Sundry,
Property Rent

INCOME	Budget 1985	Actual Sept. 30	Budget 1986
a) Fees & Registration — Dentists	\$2,398,900	\$2,423,905	\$3,010,400
Less P.L.I. Premium	874,500	868,065	1,444,250
	1,524,400	1,555,840	1,566,150
b) Fees & Registration — Hygiene	260,400	263,685	281,025
c) Examination Fees	32,000	34,625	34,000
d) Interest	45,000	46,745	45,000
e) Property Rent	2,100	1,575	2,100
f) Sundry	7,900	9,500	10,000
g) Continuing Education	49,700	43,755	50,000
h) Administration Charge — P.L.I.	50,000	50,000	75,000
Total:	1,971,500	2,005,725	2,063,275

EXPENSES			
i) Salaries & Charges	630,800	449,412	684,340
j) Postage & Courier	70,000	51,695	70,000
k) Printing Stationery & Supplies	100,000	79,568	100,000
l) Telephone	18,000	14,678	20,000
m) Equipment	75,000	62,726	80,000
n) Property	64,250	53,818	66,350
o) Staff Travel	60,000	36,924	55,000
p) Examinations	50,000	50,186	55,000
q) Council Honoraria	260,000	157,275	280,000
r) Continuing Education	85,000	74,857	90,000
s) Professional Fees			
Legal	252,500	176,971	270,000
Audit	7,500	7,750	9,000
t) Witness & Court Rep. Fees	—	9,122	15,000
u) Council Insurance	2,300	2,714	3,000
v) Council & Comm. Exp.	85,000	56,657	90,000
w) Grants	37,550	34,621	38,450
x) Administration Expenses	22,500	12,870	25,000
y) Building Fund	200,000	200,000	—
Total:	\$2,020,400	\$1,531,846	\$1,951,140
Surplus or (Deficit)	(48,900)	473,879	112,135

**1986
BUDGET EXPENSES
(Total \$1,951,140)**

37.8%	Salaries, Charges & Staff Travel
20.0%	Council Honouraria & Committee Expenses, Witness & Court Reporter Fees
14.3%	Legal & Accounting Fees
11.0%	Postage & Courier Charges, Printing, Stationery, Supplies, Telephone, Administration
7.5%	Property Expenses, Taxes & Equipment
7.4%	Continuing Education & Examinations
2.0%	Grants

REPORT OF THE PROFESSIONAL LIABILITY INSURANCE COMMITTEE

Chairman: R.M. Beyers, D.D.S.

Committee Members: G. Nikiforuk, D.D.S.,
E. Swadron, W.H. Treleaven, D.D.S., R. Donaldson

The Professional Liability Insurance Program of the College came under the same pressures as the Errors and Omissions Programs for all professions. The increase in the frequency and severity of claims has caused many insurance companies to decline to provide this form of insurance and others to raise their rates dramatically.

The Guardian Insurance Company has agreed to underwrite us for one million dollars per occurrence during 1986. Their liability commences for any claim which exceeds thirty-five thousand dollars or after the program has an aggregate loss of one million dollars. To provide this coverage in 1986 (essentially the same as 1985) they increased the premium by eighty-six percent. However, since they are the only Canadian company providing malpractice coverage we could not get competitive quotes (the American market is worse; general practitioners in the U.S.A. not using general anaesthesia or I.V. or I.M. conscious sedation pay between \$1,428.00 to \$4,820.00 per year — others pay up to \$66,000.00 per year for their insurance). Oral Health Vol. 75/No. 9.

Fortunately, we self-insure for claims up to thirty-five thousand dollars. If the dentists of Ontario can achieve a better than average claims experience, some of the savings will accrue to their benefit in the reserve fund rather than to the insurer. The Committee spent most of its time on this matter of reducing our claims experience and to that end established the following policies:

CLAIMS PREVENTION BULLETINS

These bulletins will accompany other College mailings about four times a year. They will recommend office policies to assist you in avoiding law suits. They will advise you of current trends in the settlement of claims. They will remind you of the importance of adequate record keeping. This is singularly the most cost effective measure available to us to reduce our claims experience. If a member is vulnerable to a successful suit, good records and early reporting of the occurrence can enhance the opportunity of the adjustors to make a prompt determination of the liability and offer a settlement; saving us costly legal fees. On the other hand, if the claim is frivolous, accurate records are required to defend it. Recollection doesn't count for much.

INCREASED DEDUCTIBLE

The deductible (co-insurance) portion of the settlement for which the member is responsible is increased from \$500.00 to \$1,000.00.

REPEAT OFFENDERS

Repeat offenders will experience an incremental increase of \$1,000.00 of deductible for each settlement after the first. A two year claim free period will reset the deductible to \$1,000.00.

During 1985 we retained an Actuary to evaluate our plan. His report confirmed that our premium structure and reserve policy are appropriate. The report is available on request to anyone wishing it.

The following tables are provided for your information:

1. Claims Experience — Closed Files
2. Areas of Dentistry
3. Primary Causes
4. Losses Involving Specialists — Specialty
5. Program Experience, 1977-1985)

(All tables are as of August 30, 1985).

Many thanks to Dr. Ted Fox.

Table 1

CLAIMS EXPERIENCE — August 30, 1985 CLOSED FILES

	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	Total	Closed	% Closed Files
Total number claims	29	60	43	69	80	101	119	104	140	153	148	319	152	1,517		
Claims outstanding	0	0	0	0	5	3	4	8	12	16	46	116	120	330	1,187	
Claims payment \$0.00	14	33	19	34	43	48	60	40	59	73	59	182	27		691	58.21
\$ 1.00 - 1,000.00	11	11	10	16	12	19	26	27	23	18	11	9	2		195	16.43
1,001.00 - 5,000.00	2	12	10	10	14	18	21	20	26	27	25	11	3		199	16.76
5,001.00 - 10,000.00	0	1	4	3	2	9	4	1	12	10	5	1			52	4.38
10,001.00 - 15,000.00	0	1	0	4	2	4	0	5	4	5	1				26	2.19
15,001.00 - 25,000.00	1	1	0	2	0	0	2	0	3	2	1				12	1.01
25,001.00 - 50,000.00	0	0	0	0	1	0	2	0	0	2					5	.42
50,001.00 - 100,000.00	1	1	0	0	1	0	0	3	1	0					7	.59

Resume of Closed Files: —

58.21 were closed with no claims payment or legal fees
 74.64 were closed with claims payments and legal fees under \$ 1,000.00
 91.40 were closed with claims payments and legal fees under 5,000.00
 95.78 were closed with claims payments and legal fees under 10,000.00
 97.97 were closed with claims payments and legal fees under 15,000.00
 98.98 were closed with claims payments and legal fees under 25,000.00
 1.01 were closed with claims payments and legal fees over 25,000.00

Table 2

AREAS OF DENTISTRY

	1977	1978	1979	1980	1981	1982	1983	1984	1985	Total
Endodontics	9	15	17	14	10	26	24	31	16	162
Operative Dentistry	16	15	6	10	12	11	4	9	6	89
Orthodontics	3	3	3	2	7	10	5	70	3	106
Periodontics	1	8	6	3	3	1	6	5	5	38
Prosthodontics - Fixed	14	16	24	6	12	25	20	34	14	165
Prosthodontics - Removable	4	4	10	4	9	7	8	14	6	66
Surgery	24	30	36	39	64	47	45	79	43	403
Radiology	0	1	0	1	0	0	0	1	0	3
General Dentistry	9	9	17	24	21	24	36	74	31	245
										1,277

Table 3

Primary Cause	1977	1978	1979	1980	1981	1982	1983	1984	1985	Total
Untoward reaction to drugs or anaesthetics/Anaesthetic accident resulting in incapacitation	1	2	2	2	1	2	4	13	12	39
Anaesthetic accident death/Death following/during treatment	2	4	2	1	4	1	0	5	3	22
Extraction wrong/extra tooth/teeth/Treatment wrong tooth	3	6	8	10	14	12	10	13	10	86
Failure to diagnose or treat	7	15	13	10	15	15	14	18	13	120
Fracture of mandible	8	2	5	1	0	1	2	5	3	27
Ingestion of instrument/material/Inhalation of instrument/material/Instrument breakage tooth/tissue	6	6	8	9	2	6	8	8	3	56
Paresthesia - following surgery	3	5	4	8	13	13	14	29	8	97
Paresthesia - following injection	2	3	0	3	2	2	4	8	7	31
Perforation of sinus	1	2	3	0	1	1	3	1	1	13
Roots not removed	0	0	1	1	2	1	0	4	0	9
Soft Tissue trauma	4	2	5	5	10	10	3	12	4	55
Trismus	1	2	0	0	0	2	1	1	4	11
Unsatisfactory dentures	4	4	10	4	9	6	10	16	5	68
Unsatisfactory fixed bridge(s)	13	14	16	7	10	22	21	26	16	145
Unsatisfactory operative	4	12	4	7	12	10	7	11	7	74
Unsatisfactory orthodontics	2	2	1	2	5	5	4	65	2	88
Unsatisfactory periodontics	0	0	3	2	1	1	3	3	2	15
Unsatisfactory endodontics	3	10	13	9	4	14	11	21	11	96
Unsatisfactory oral surgery	6	5	3	7	17	5	11	16	9	79
Fracture of tooth	3	3	3	5	3	3	4	2	5	31
Untoward reaction to treatment	1	1	4	3	5	10	10	8	2	44
Unsatisfactory implant(s)	0	0	1	0	2	0	0	1	0	4
Other	0	3	11	3	8	3	4	30	5	67

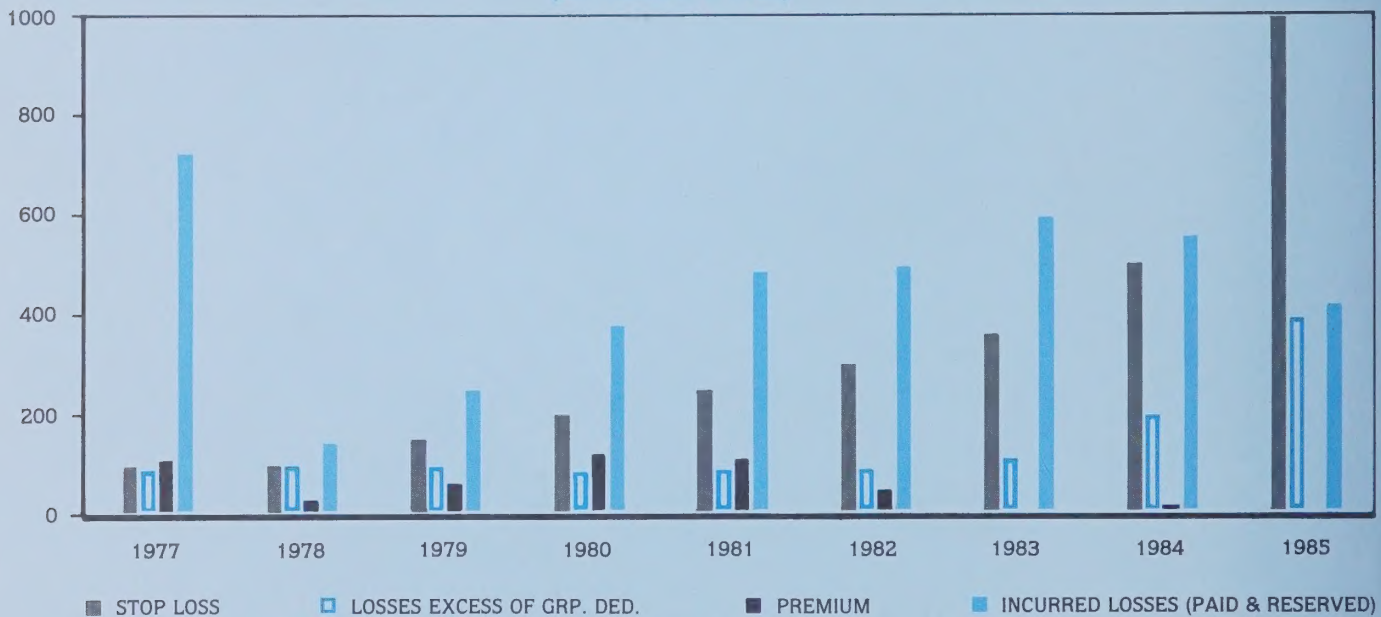
Table 4

CLAIMS INVOLVING SPECIALISTS
(Percent of total claims)

1977	18 (23%)
1978	22 (22%)
1979	28 (24%)
1980	34 (33%)
1981	52 (37%)
1982	43 (28%)
1983	37 (25%)
1984	139 (44%)
1985	31 (20%)
TOTAL	404 (27%)

Table 5
(\$'000'S)

THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO
PROGRAM EXPERIENCE 1977 - 1985
(SEPTEMBER 1, 1985)



REPORT OF THE LEGAL AND LEGISLATION COMMITTEE

Chairman: R.T. Lang, D.D.S.

Committee Members: W.J. Dunn, D.D.S.,
R.M. Matsui, D.D.S., W.R. Patrick, D.D.S.,
W.R. Hilliard, D.D.S., E. Swadron, R. Donaldson

HEALTH PROFESSION'S LEGISLATION REVIEW

Three years ago the Minister of Health named a health profession's legislation review team that was directed to make recommendations about which health professions should be regulated by statute and how statutes governing the professions should be updated.

The last overhaul of legislation began with the report of the Committee on the Healing Arts in 1970 and culminated in the Health Disciplines Act, 1974. Such a review happens only once every decade or two and we at the College believe it is of extreme importance to the future of dentistry.

By enacting the Health Disciplines Act of 1974, the government confirmed the "college system" of self-regulation for the professions of dentistry, medicine, nursing, optometry and pharmacy. The Act established new structures and procedures for ensuring due process in decisions concerning complaints, discipline and registration. It also created the Health Discipline Board to offer health care consumers a non-judicial avenue of appeal from any decision by one of the colleges.

Initially, the review will determine the form under which currently regulated health professions should continue to be regulated. It will also determine which currently unregulated professions should be brought under the regulatory umbrella. Many professions currently unregulated by statute have indicated a desire for some form of statutory regulation.

The appropriate form of regulation will also have to be decided. Some professions are seeking full-fledged self-regulation along the lines of The Health Disciplines Act. At the other end of the spectrum, professions may prefer regulation in combination with other disciplines under a single governing body.

Perhaps the most important objective of the review is to settle an array of outstanding issues among several of the health care professions. For example, almost all unresolved regulatory issues involve disagreements between adjacent professions about their respective scopes of practice and their role in the delivery of health care.

The review team will consider if the legislation for each profession should define the scope of practice, and if so, what that definition should be. It will ask if licences should be granted conferring an exclusive right to practice, and will consider alternatives, such as permitting specified overlapping scopes of practice or certification i.e. — restricting the use of a specified title without restricting the area of practice.

In the fall of 1983, the review team circulated a detailed list of 22 topics for the consideration of all health disciplines, as well as to organizations representing institutions which employ, train or bargain for health professionals, and to consumer and advocacy groups.

The R.C.D.S. submitted a brief replying to all 22 topics. Since this was an open, public process, all submissions were available to the other participants in the review for their reac-

tion and comment.

The review team evaluated the over 120 responses received, and then requested a second submission from each of the responding groups. This second submission was to answer specific questions from the review team which were intended to help clarify or elaborate upon statements made in the first submission.

The review team then decided that, for a profession to become self-regulating, it must fulfill nine specific criteria. It has identified 34 groups that definitely do not meet these criteria, and they have now been eliminated from the review process.

The remaining 37 groups that successfully survived this "first cut" will now receive further consideration for self-regulation by the review team. Included in this group are dentists, dental hygienists, denture therapists and dental technicians.

On August 12, 1985, the College received a request from the review team for our concept of "clustering" all the dental groups together. Consequently, the R.C.D.S. developed a comprehensive proposal for the clustering of dentists, dental hygienists, dental therapists and dental technicians under one legislative umbrella.

In our brief to the review team, we stressed that only members of The Royal College of Dental Surgeons have the total body of research and knowledge fundamental to the needs of the public and essential to the effective and safe delivery of dental care. Accordingly, if clustering is to occur, dentists must necessarily form the core group within such clustering.

We also made it quite clear that the ultimate responsibility for delivery of dental care resides in dentistry, and, to the extent that other para-dental groups are to engage in the delivery of health care, supervision must be a prerequisite. This must also include the supervision of denture therapists, not only as it relates to partial dentures, but also to complete prosthodontics.

The reaction to the review thus far has generally been enthusiastic. Most participants including the R.C.D.S. are pleased the review is being conducted and appreciate the open format and the opportunity for informal dialogue.

In health care planning, we must recognize the interdependence of all the various disciplines and the need for greater co-operation. The review process, I am confident, will bear fruit; but will do so most easily and beneficially if all participants keep foremost in mind the commitment which we must all share — to protect and promote the health of the people of Ontario.

CONCLUSION

As Chairman of the Committee, I would like to thank the members of my Committee and the staff of the College for their kind assistance and support.

I would like to thank the many members of our profession who have taken the time to inform me of their views and concerns on the many topics under the consideration of the Legal and Legislation Committee.

I encourage all members of our profession to let the College know your views on the subjects that are important to you. When decisions concerning your professional lives are about to be made, your input is extremely vital.

Anaesthesia

REPORT OF THE ANAESTHESIA AND SEDATION COMMITTEE

Chairman: W.H. Treleaven, D.D.S.

Committee Members: G.G. Grayson, D.D.S., W.R. Hilliard, D.D.S., G.B. Beber, D.D.S., V. Direnfeld, D.D.S., H.E. Dexter, D.D.S., R.S. Locke, D.D.S., N.A. McFarlane, D.D.S., S. Small, D.D.S. (O.D.A. Observer)

The year 1985 was not a busy one for the Anaesthesia and Sedation Committee. With the December 1983 revision of the Anaesthesia and Sedation Guidelines of the College in place, the workload of the Committee has greatly decreased.

The following areas may be of interest to members of the College:

ANAESTHESIA AND SEDATION QUESTIONNAIRES

Over the past two years, several mailings of the same questionnaire were circulated to the dental profession of Ontario with all but approximately 400 members responding.

This questionnaire asked whether or not the practitioner used anaesthesia or sedation techniques in his/her office. If the answer was in the affirmative, information regarding the techniques, modalities and training of the practitioner was elicited.

The members of the Anaesthesia and Sedation Committee were satisfied with the excellent response rate, noting that those practitioners whose practices fell short of the Anaesthesia and Sedation Guidelines were informed as such and recommendations made to correct any deficiencies.

The Committee members have recommended that the annual membership renewal form sent to each dentist contain questions dealing with the various methods used in their practices to assist with patient management i.e.—oral, intramuscular and intravenous sedation, nitrous oxide, general anaesthesia, acupuncture, hypnosis, etc. They were of the opinion that a regular updating of such information would assist the College from a statistical point of view and would allow the monitoring of certain practices where techniques are being used by practitioners with marginal training.

Of note, in 1985 a Discipline Hearing was held in which the Anaesthesia and Sedation Guidelines were used as a measure of comparison of the training of the practitioner involved.

STANDARD EMERGENCY KIT

The committee members agreed to study the need for the College to become involved with the formulation of guidelines for emergency kits.

Some of the members felt that the purchase of a sophisticated emergency set-up by dentists is not the answer to this problem and the review being contemplated would look at such issues as the training of practitioners in emergency measures, the need for protocol in each office outlining the role of all office staff members when an emergency occurs, and the desirability for all practitioners and staff to maintain currency in cardiopulmonary resuscitation training.

During the course of the year, the Committee learned that

such an exercise is being undertaken by the Ontario Dental Association under the chairmanship of Dr. Steven Small. Because of this, it was agreed that this matter be held in abeyance for the time being.

COMMITTEE RESIGNATION

It was with regret that, during the course of 1985, a long-standing member of the Anaesthesia and Sedation Committee, Dr. Ian Schofield, resigned as the representative from the University of Western Ontario.

The College appreciates Dr. Schofield's service to the Committee and note that he has offered to provide assistance in the future if required.

Dr. Schofield's position has been filled by Dr. N.A. McFarlane of London, a part-time staff member at the University of Western Ontario in the Division of Oral and Maxillofacial Surgery.

COMMITTEE RESTRUCTURING

At the April 1985 meeting of Council, it was agreed that only one member of Council need serve on the Anaesthesia and Sedation Committee instead of the three members who have served in the past. The remainder of the Committee will be made up of representatives of the Ontario Society of Oral and Maxillofacial Surgeons, the Ontario Dental Society of Anaesthesiology, the Conscious Sedation Study Club and the two Faculties of Dentistry.

Further reorganization of the College structure will take place commencing in January 1986 with the function of this Committee being taken over by a new committee, the General Purposes Committee.

It is anticipated that whenever anaesthesia matters are discussed, a sub-committee of the General Purposes Committee will be struck, made up of the various representatives of the above-noted special interest groups.

ACKNOWLEDGEMENTS

I wish to thank Dr. Don McFarlane of the College staff for his capable handling of Anaesthesia and Sedation matters on an on-going basis and for his assistance to this Committee. I would also like to thank my fellow Committee members for their interest and support.

U. of T. Report

REPORT OF THE DEAN OF THE FACULTY OF DENTISTRY UNIVERSITY OF TORONTO

A.R. TenCate, B.D.S., Ph.D.

INTRODUCTION

I am pleased to present this annual report to the Council of The Royal College of Dental Surgeons of Ontario. I believe Council, and the public of Ontario, is now fully aware of the financial difficulties its Universities have been facing for the past number of years – a recognition brought about largely because of press attention to the Bovey Commission which properly documented the seriousness of the underfunding the Universities of Ontario have experienced. The Faculty of Dentistry has not escaped unscathed and, in terms of constant dollars, the Faculty now operates with 1.5 million dollars less than it did seven years ago. That we have managed reflects our ability to increase income through increased patient fees, coupled with improved management, increased work-loads for staff and a reduction in student enrolment. But this constant and unremitting financial erosion must cease if dental education in the Province of Ontario is to be sustained at the level which is satisfactory to Council. Preliminary signs indicate that the new Government of the Province is taking steps to halt and correct the haemorrhage the system has experienced over the past decade.

IN MEMORIAM

It is with real regret that I have to record the passing of Dr. Bruce Hord during the past academic year. Dr. Hord served dental education in an outstanding manner and for the past ten years in particular as head of Restorative Dentistry. He did much to influence and ensure the quality of our graduates. High standards and concern for young people were his hallmarks and he will be, and is, sadly missed by the Faculty.

RESIGNATIONS

Dr. J. Cox, D.D.S., Dip. Prosth., M.Sc. resigned his assistant professorial appointment to return to private practice.

Mr. David Keeling, M.A., Faculty Secretary and Assistant Dean (Administration), resigned to take up the appointment of Assistant to the Vice-Provost, Health Sciences. In this capacity he will still retain a connection and interest with dentistry. Mr. Keeling's administrative skills did much to help the Faculty manage its budget reductions, its Completion Campaign and its overhaul.

NEW APPOINTMENTS

I am pleased to announce the appointment of Dr. David Locker, B.D.S., Ph.D., with the rank of Associate Professor. Dr. Locker comes to the Faculty from the United Kingdom, where he earned his B.D.S. and a Ph.D. in Sociology. He joins the department of Community Dentistry.

Dr. Mary Waye, B.Sc., Ph.D., joins the Faculty from the University of Cambridge. Dr. Waye is a molecular biologist and is taking up a new position funded by the Medical Research Council. She will become a member of the M.R.C. Group in Periodontal Physiology.

Periodontal Physiology.

Ms. Donna Crossan, M.A., M.B.A. has been appointed Faculty Secretary and Assistant Dean (Administration), replacing Mr. Keeling. Ms. Crossan comes to the Faculty from the Faculty of Management Studies, University of Toronto.

INTRA-FACULTY APPOINTMENTS

Dr. C.O. Munroe, B.Ch.D. (Malta), F.D.S., R.C.S. (England), M.D., (Malta) has been appointed Associate Dean for Undergraduate Affairs, replacing Dr. N. Levine (who has completed his five-year term). A new Decanal position has been created in the past year, namely Associate Dean for Research, and the first appointee is Dr. B.J. Sessle, B.D.S. (Syd.), B.Sc. (Syd.), M.D.S. (Syd.), Ph.D. (N.S.W.). Dr. Dorothy McComb, B.D.S. (Edin.), M.Sc.D., acting head of restorative dentistry, has been appointed head of that department, succeeding the late Dr. Hord.

PROMOTIONS

The following faculty have been promoted:

Dr. G. Altuna, D.D.S., Dip.Ortho., M.Sc.D.

– to Associate Professor

Dr. C. Torneck, D.D.S., M.S. (Mich.), F.R.C.D.(C)

– to Associate Professor

Dr. J.G. Dale, D.D.S., F.R.C.D.(C), Dip.A.B.O., F.I.C.D.

– to Associate Professor

Dr. D. Deporter, D.D.S., Dip.Perio., Ph.D.

– to Full Professor

EDUCATION

In the past year, 152 students graduated from the Faculty as follows:

D.D.S.	121
Diploma	19
M.Sc.	8
Ph.D.	4

With an annual undergraduate intake of 104, our total enrolment for the session 1985-86 is 542, broken down as follows:

D.D.S.	408
Diploma	49
Masters	26
M.Sc.D.	7
Special Students	6
Combined M.Sc./Diploma	4
Combined Ph.D./Diploma	2
Ph.D.	13
Interns	27

The past academic year saw a significant change in our Diploma Programme in Dental Public Health. This programme is now a two-year one (instead of one year) and to it has been added a period of field placement with additional elective courses. The field placement component is designed to give the student a hands-on experience in operating a dental public health agency.

RESEARCH AND SCHOLARLY ACTIVITY

The research activity within the Faculty and subsequent publication has flourished with almost 2.5 million dollars being attracted from external granting agencies for the prosecution of research. I would make one comment and that is that there is now an increasing number of clinical trials taking place which represents the logical transfer of bench research to the clinical situation. I would also mention that three text books have been produced by Faculty members in the past year (Tissue Integrated Prostheses: Osseointegration in Clinical Dentistry, by Dr. G.A. Zarb; Understanding Dental Caries, Vols. 1 and 2 by Dr. Gordon Nikiforuk; and Oral Histology – Development, Structure and Function, 2nd Edition, by Dr. A.R. TenCate), an indication that faculty, as well as creating new knowledge, are also involved in its transmission, which of course is the true function of a University.

ISSUES

Each year in these reports, I try to highlight a particular issue which I believe is deserving of the College's attention as it fulfills its role to ensure the provision of quality dental service for the public of Ontario. This year I wish to highlight the admissions process to the Faculty of Dentistry. The last cycle of admissions saw almost 800 Ontarians competing for 104 places. As a result, to gain admission a B+ was obligatory and most of the first year class are 'A' students. It is obvious we are still attracting high quality individuals into the profession, but this is in stark contrast to the situation in the United States, where the size of the applicant pool and number of places available is now equal and causing concern in that this may cause a significant lowering of admission standards as dental schools strive to maintain full enrolment. In Canada and the United States, there is much discussion about dental manpower and declining dental disease and at first glance the market place seems to be driving the applicant pool down in the United States only. The only significant difference I detect is the cost of dental education which, in Canada, is remarkably cheap when compared with costs in the United States. I suspect that there would be an equal decline in our applicant pool should the real cost of dental education be better reflected in tuition fees. Even though fees are not likely to increase significantly we must anticipate that the current public awareness of declining dental disease will eventually reduce the size and quality of our current applicant pool. It is for this reason that our admissions office is currently actively promoting dentistry as a career in High Schools and with First Year University students – to ensure that we continue to have high quality entrants into the profession – even though the applicant pool, and the profession, will likely be smaller in the future.

U.W.O. Report

REPORT OF THE DEAN OF THE FACULTY OF DENTISTRY UNIVERSITY OF WESTERN ONTARIO

Ralph I. Brooke, B.Ch.D., L.D.S., F.D.S.,
R.C.S., M.R.C.P., L.R.C.S.

ACADEMIC AFFAIRS

In March 1985 a University of Western Ontario Chapter of Omicron Kappa Upsilon, the Honour Dental Society, was established. Dr. Wilfrid H. Feasby was the prime mover in the establishment of this Chapter and becomes its first President.

A Faculty Research Day was held on October 27, 1984. A wide spectrum of research activity was presented. The Assistant Dean, Research, Dr. John T. Hamilton, organized and chaired the day which was a great success.

The Restorative Dentistry Clinical Research Unit was established. It has already received corporate funding for approximately \$250,000. The Endowment for Dental Research now stands at approximately \$200,000.

The first Summer Teaching Institute, hosted by the Association of Canadian Faculties of Dentistry, was attended by Drs. H.S. Sandhu and L. R. Yanover in June 1985.

In order to improve communication between the clinical and basic science departments, meetings were held with the Dean and Associate Dean, Academic, and the Chairman and representatives of each of the Basic Science Departments. These meetings will be carried out annually.

FACULTY

Dr. J.D. Awde has been awarded funding for the second year of his Terry Fox Fellowship. Dr. D.H. Charles was awarded the W & J Dunn Fellowship for a further year to pursue his M.Sc. program at the University of Michigan. Dr. H.S. Sandhu (O.M.H. Career Scientist) and Dr. L.R. Yanover (M.R.C. Centennial Fellow) are now on site and have equipped their laboratories and commenced their research activities. The first A.C.F.D. Summer Teaching Institute (June 17-28, 1985) was attended by Drs. Sandhu and Yanover. Dr. D.G. Gardner has moved to the University of Texas and Dr. J.E. Stakiw has resumed private practice. Dr. E.A. Cornish has accepted a post-retirement appointment in the Division of Periodontics and will serve as its Chairman.

VISITORS

The 1984 M.R.C. Lecturer (November 7-9, 1984) was Dr. Norman D. Mohl of the State University of New York at Buffalo. His public lecture on temporo-mandibular joint problems was well received. The Annual Paediatric and Community Dentistry Lecture (November 2, 1984) was given this year by Professor Barry C. Leighton on King's College, England.

Dr. Ronald Dubner, consultant of the U.S. National Institute of Health, visited the Pain Research Unit in September 1984 to evaluate the Unit and advise on plans for its development.

STUDENT AFFAIRS

Ms. Maxine Herbert, Year I, was awarded the second Terry Fox Cancer Research Clerkship. She is working with Dr. Roger Inch in the Cancer Clinic.

Mr. J. Gordon Payne, Year II, continues with the second year of his clerkship. We are particularly pleased that Western is represented in these clerkships as only three are awarded annually across Canada.

The London & District Dental Society Student Clinic Night was again a success. Six senior students participated and Mr. Robert B. Bizley was selected to represent the Faculty at the Annual Meeting of the Canadian Dental Association, Student Clinicians Program. Mr. Bizley's presentation is entitled "Processed Bases for Removable Prosthodontics". The Clinic Night was organized by Dr. Wesley J. Dunn.

Mr. Sandy Tse, Year II, represented the Faculty at the American Dental Association Student Research Conference (April 1985) in Boston, Massachusetts.

Six students were selected as M.R.C. Summer Scholars: Mary F. Buchanan, working with Dr. C. Anderson (Pathology); Robert C. Chiasson, working with Dr. V. Bramwell (Radiation Oncology); Philip du Toit, working with Dr. L.N. Johnson (Dental Materials Science); David O. Favell, working with Dr. S.L. Kogan (Oral Medicine); Steven J. Fielding, working with Drs. D.H. Charles (Removable Prosthodontics) and L.R. Yanover (Oral Biology); Bryan U. Koppers, working with Dr. J.A. Reid (Oral Radiology).

Ms. Liliane Le Saux, Year III, attended the A.C.F.D. meeting in Las Vegas, Nevada (March 1985) as the official student representative for the Canadian Faculties.

STUDENT PERFORMANCE

The following are the results of student performance for the academic year 1984-85:

Fourth Year: 56 students, out of which 9 achieved honours (3 with distinction), 47 passed (2 with conditions) and none failed.

Third Year: 54 students, out of which 6 achieved honours, 45 passed (12 with conditions), 2 were incomplete and 1 failed.

Second Year: 54 Students, out of which 9 achieved honours, 45 passed (11 with conditions) and none failed.

First Year: 39 students, out of which 9 achieved honours, 30 passed (3 with conditions) and none failed.

UNDERGRADUATE AFFAIRS

The Dean and Associate Dean, Academic, personally interviewed all students and recommendations with regard to teaching, courses, etc. were taken to the various Divisions, Departments and individual faculty members.

An innovation this year was a special meeting with all the Divisional Chairmen and representatives of the senior students. Concerns regarding many matters were openly and frankly discussed and both the student representatives and faculty members expressed the view that this type of free-wheeling discussion is useful.

493 applications were received for 40 positions in the first year class, for 1985-86. This compares to 369 applications received in 1984. In accordance with new Human Rights Legislation, there will no longer be discrimination according to an applicant's province of residence, thus all Canadian are now being given equal access status.

The following statistics are presented for the class of 1988

relative to the classes of 1986 and 1987:

	1986	1987	1988
Class Size	56	56	40
Sex - M	46	43	29
- F	10	13	11
Age Range (Average)	20-27 (22)	20-44 (23)	19-29 (22)
Number Married	3	4	4
Class Qualifications			
- Average of best two pre-admission years	78.2%	79.9%	81.0%
- Ontario Grade XIII	86.0%	91.0%	90.0%
- Ontario Scholars	45.0%	55.0%	55.0%
- Previous Degrees	63.0%	48.0%	33.0%
- Dental Aptitude Test Scores			
- Carving	5.71	5.55	5.38
- PMAT	5.68	5.55	5.75

The academic year will be restructured effective with the 1986-87 academic year and will require extensive consultation with students, departments and divisions in the implementation of this. Years I, II and III will have a fourteen-week Fall term, plus one week examination period; the Winter term will be sixteen weeks in duration with two weeks of examinations following. Year IV will consist of fifteen weeks in the Fall term and sixteen weeks in the Winter term, with final examinations being held in weeks nine and ten of that term.

Several requests for transfer were received from students registered at other dental schools. One of these will be admitted to Year II on condition that he pass written and practical examinations in two areas during the summer. (He completed his first year of dental training at this university a few years ago.) Two other applications for transfer were rejected on the basis of ineligibility.

The Associate Dean, Clinical Affairs, has reported some difficulty in supplying patients, especially in Endodontics, and the problems presented by patients in Operative Dentistry are becoming more involved.

Six interns and ten senior students participated in the two northern programs (Moose Factory/Sioux Lookout and Kenora/Dryden).

CONTINUING EDUCATION

Update '85 (January 26, 1985) with sponsorship from Rhone Poulenc Pharma Inc. was a great success. Close to 100 People attended. The Assistant Dean, Continuing Education, Dr. Gerald Wright, organized this day which, hopefully, will be an annual event.

Homecoming 1984, for the Classes of 1974 and 1979, featured a Champagne Brunch with 49 alumni in attendance. Three members of the faculty gave presentations. This format was an enormous success and it is intended to repeat it.

Six other Continuing Education courses were held during the 1984-85 academic year. The average attendance was 15.

COMMITTEE ACTIVITIES

The Board of Governors approved the discontinuation of the Advisory Committee to the Faculty of Dentistry. It is felt that the Faculty is now mature enough not to require this Committee and that there are many opportunities for communication between those who sit on the Committee and the Faculty, thus rendering annual meetings superfluous.

An Appointments Committee was established in accordance with University policy. Part-time as well as full-time appointments will be considered. The Committee will review applications, recommend the appropriate rank, type and length of appointments.

The Clinical Policy Committee is developing a system which will enhance comprehensive patient care, and also being considered is the matter of bad debts, the write-off of outstanding accounts. The Faculty's experience with outstanding accounts has greatly improved in the last year.

The procedures of the Clinical Divisions' Promotions and Tenure Committee are being changed to give an increased emphasis to counselling of faculty members. The Joint Faculty Promotion and Tenure Committee will remain unchanged.

RESEARCH AND PUBLICATIONS

During the 1984-85 academic year, 39 publications emanated from members of our faculty. In addition to this, 31 research grants (both internal and external) were received.

Other Reports

REPORT OF THE INSPECTOR

Mr. Frank Greer

ILLEGAL PRACTICE OF DENTISTRY

Obtaining proper evidence for the prosecution of cases of the illegal practice of dentistry remains a problem. The statute of limitations allows only six months from the date of the offense to launch the action. Often it is beyond six months when we are made aware of the case.

In most cases on a "plea of guilty", I present the evidence for the Crown Attorney in the courts.

There has been a decline in the number of complaints brought to our attention against denture therapists this past year. The insurance companies are either not getting bills for partial dentures by denture therapists or are not bringing them to our attention.

a) Toronto, Ontario

Mrs. Marina Gorelik, 205 Wilda Avenue, Apt. 1809, Willowdale, Ontario was practicing dentistry in her apartment. A female patient received two fillings on two separate occasions. On her second visit a piece of tooth was fractured from one of her front teeth. This caused her much concern and as a result of this the complaint was brought to our attention. Mrs. Gorelik, who was a dentist in Russia, came to this country eight years ago and has never been licensed in Canada.

She appeared in Provincial Court, 1000 Finch Avenue, Toronto and pleaded guilty to the charge of the Illegal Practice of Dentistry. Judge T. Crossland heard the case on October 9th, 1985 and gave her a \$300.00 fine.

b) Ottawa, Ontario

Several denture therapists were charged with Illegal Practice of Dentistry during 1985, but as of the end of the year, these matters had not come to trial.

These charges involved the making of a complete denture for a patient by dental technician and the making of a full upper denture and a lower partial denture by unqualified persons.

c) During 1985, it was brought to the attention of the College that a former member of the College, presently under suspension pending successful completion of certain retraining programs and the clinical portion of the National Dental Examining Board examination, had been practicing while under suspension.

The member was charged in Provincial Court for the Illegal Practice of Dentistry and although there have been several court appearances, the trial will not take place until some time in 1986.

Judicial Review

Three cases referred to the Discipline Committee are awaiting Judicial Review on the basis of the legality of the charges. Two other cases have been given the right to appeal Judicial Review decisions to a higher court. One case of the decision and penalty of the Discipline Committee is under Judicial Review. The rights of the Executive Committee are being challenged by Judicial Review on three other matters.

Inspections

The inspections of dental offices have increased as more direction to do so has been ordered by the Complaints Committee and the Executive Committee during the past year. This is very time-consuming but is proving quite worth while. These visits often eliminate the need for more costly and less effective disciplinary measures.

For Your Information

Advertising and sign complaints are increasing.

I have some concern about the possible abuse of assumed names for group practices. I have found that several offices have only one or two full-time dentists working instead of three as required. The reason given to me is that a dentist has left the practice and has not been replaced. This situation could continue for months which is in violation of the regulations.

REPORT OF THE DENTAL HYGIENIST OBSERVERS

Mrs. Lynda Mickelson, Mrs. Rosemary Donaldson

As official observers we have viewed the events of the past year with great interest, and we have participated to the fullest extent.

Just as dental hygienists make a valuable contribution in the delivery of dental care in this province, more and more we see how valuable our contribution is to the licensing and associated administrative functions relative to dental hygienists.

A forward step for 1986 has been the creation of a separate committee to deal with dental hygiene issues. In the past, hygiene matters apart from education and licensing examinations have been handled by the Executive Committee and the Council of the College, where the dental hygiene observers did not have voting privileges. In our opinion, this separate committee where one of the dental hygienist observers is chairperson, is a progression in the governing of dental hygienists in Ontario.

REPORT OF THE AD HOC COMMITTEE ON QUALITY ASSURANCE

Chairman: R.M. Matsui, D.D.S.

Committee Members: R.L.J. Fillion, D.D.S., W.R. Hilliard, D.D.S., G. Nikiforuk, D.D.S., W.H. Treleaven, D.D.S., J. Stefura, L.L. Mickelson

In 1985, a sub-committee composed of the Chairman and Dr. Hilliard was appointed with the task of drafting a questionnaire for circulation to the profession on the subject of Quality Assurance.

Council also directed that the Committee observe the O.D.A.'s Practice Enrichment Program (P.E.P.) which is apparently progressing quite successfully.

The sub-committee determined that in order to create the

questionnaire, the present quality of dentistry being rendered in Ontario must first be established. Consequently, the Chairman met with Dr. Donald Lewis, of the Department of Community Dentistry at the Faculty of Dentistry, University of Toronto, and reviewed material prepared by the College staff outlining trends in Complaints, Discipline and Executive Committee deliberations from 1970 to 1984. In addition, the Chairman and Dr. McFarlane attended a Symposium on the subject of Quality Assurance and Cost Containment in Oral Health Care. The program featured recognized experts in the field and was held by the School of Dentistry, University of Michigan.

It became quite apparent that there is very little valid existing data and statistical information available specifically on the situation in Ontario.

As a result, Council agreed that before any questionnaire is sent to the profession and indeed, before any new program of Quality Assurance is implemented by the R.C.D.S., further efforts be expended to determine the present quality of dental care being rendered in this province. Furthermore, if there are areas of concern identified, it was agreed that the problem(s) must be clearly outlined so that the Committee can determine appropriate objectives in the formation of any new Quality Assurance program.

It is hoped that the Committee will secure the services of an independent consultant to help obtain the desired information.

REPORT OF THE R.C.D.S./O.D.H.A. LIAISON COMMITTEE

Chairman: G.G. Grayson, D.D.S.

Committee Members: G. Nikiforuk, D.D.S., Rev. R.P. Thomas, R. Donaldson, L.L. Mickelson, J.A. Pearce

The year 1985 saw the culmination of many years of discussion and negotiation with the Ontario Dental Hygienists' Association and other interested groups regarding the supervision of dental hygienists.

Several meetings were held with input from the Ontario Dental Association, the Ontario Society of Public Health Dentists, the Ontario Dental Hygienists' Association and this Committee which resulted in a realignment of the duties which may be performed under the direction of a member (dentist) and those which must be performed under supervision.

In essence, the duties allowable under direction are those normally performed in public health settings and include screening examinations, history taking, preliminary charting, light/routine scaling and polishing, the application of fluorides/pit and fissure sealants, the taking of impressions for study models and patient education.

The above duties must be authorized by a member, but he or she need not be present when the duties are being performed.

The procedures requiring direct supervision (meaning the member must diagnose the condition to be treated by direct examination of the patient, authorize the procedures to be performed, be present in the office suite or hospital setting

while the procedures are performed and subsequently satisfy him/herself as to the acceptability of the treatment by direct examination of the patient) include those traditionally performed by dental hygienists including periodontal examination, deep periodontal scaling and root planing, application and removal of periodontal dressings, removal of sutures and designated orthodontic duties.

Until such time, however, that the appropriate Regulations are changed by government, the following definition of supervision will apply:

"that a dentist be present in the office suite where the service is being rendered by the hygienist and that the patients are aware that their treatment is being supervised by the dentist and, further, that the dentist see the patient in order to confirm the preliminary findings and make the appropriate diagnosis and treatment plan, and monitor the treatment being rendered".

REPORT OF THE AD HOC COMMITTEE ON REORGANIZATION

Chairman: G.G. Grayson, D.D.S.

The purpose of this newly formed Committee was to suggest a possible reorganization of the College committee structure to hopefully decrease the cost of meetings by decreasing the number of committees, number of meetings and the size of the committees. Highlights of this Committee's recommendations that will take place immediately are as follows:

THE STATUTORY COMMITTEES

- 1. The Executive Committee** will include the functions of the former Finance and Property, O.D.A. Liaison and Legal and Legislation Committees.
- 2. The Registration Committee** will add and include the functions of the Education Committee (including appeals from the dental hygiene examinations) and Quality Assurance.
- 3. The Complaints Committee** will remain the same, 3 members: 2 dentists and 1 lay member.
- 4. The Discipline Committee** This will eventually expand to include all Council members with the exception of the members of the Complaints Committee.

THE STANDING COMMITTEES

The President is an ex-officio member on these committees.

- 1. Professional Liability Insurance Committee.** This Committee will consist of 3 members: 2 dentists and 1 lay member and consultants at the Committee's discretion.
- 2 Committee on Dental Hygiene Matters.** This Committee will consist of 5 members: 2 dental hygienists, 2 dentists and 1 lay member. This Committee may be chaired by a dental hygienist. This Committee will conduct licensing examinations for dental hygienists, plan continuing education courses for

dental hygienists, study and make recommendations to Council on legal and legislative matters involving dental hygienists, e.g.— supervision, regulation and changes, and finally perform such other duties concerning matters related to dental hygiene and dental hygienists as may be assigned from time to time.

3. General Purposes Committee. To consist of 5 members. The chairman will be the Vice-President with 1 lay member, 2 dentists and 1 dental hygienist. The function of this Committee is to make recommendations on the delivery of dental care, to perform such other duties as may be assigned from time to time and to form sub-committees (Ad Hoc) when required.

NATIONAL DENTAL EXAMINING BOARD REPORT

R.E. Jordon, D.D.S.

Beginning in January 1986, the format of the National Dental Examining Board's comprehensive examination will change.

Rather than the written, pre-clinical and clinical parts of past years, there now will be a written examination and a three-part clinical examination to be taken consecutively. All examinations may be taken in French or in English, but in Canada only. Failure to pass one stage of the comprehensive examination disqualifies a candidate from proceeding to the next stage of the examination.

The examination content is as follows:

I WRITTEN EXAMINATION

This examination (multiple-choice type questions) consists of the following subjects, each of a three-hour duration:

1. Oral Diagnosis, Pathology, Medicine, Radiology and Treatment Planning
2. Operative Dentistry, Dental Anatomy and Endodontics
3. Prosthodontics — fixed and removable
4. Orthodontics and Pedodontics
5. Periodontics, Oral Health Maintenance and Patient Education
6. Oral Surgery and Clinical Therapeutics.

II CLINICAL EXAMINATION

Part A — Duration: two and one-half days

1. Diagnosis, Treatment Plan and Design for removable partial dentures

2. Restorative technique on manikins.

Part B — Duration: two and one-half days

1. Diagnosis and Treatment Planning — written
2. Prosthetics and Masticatory Physiology on a patient: Construction of maxillary and mandibular complete dentures (ready for processing).

Part C — Duration: two and one-half days

1. Restorative dentistry on patients
2. Radiology technique on patients.

Candidates are requested to provide their own patients for all restorative and prosthetics procedures.

The 1986 fee for the comprehensive examination is \$3,540.

REPORT OF THE DENTISTRY REVIEW COMMITTEE

Chairman: E.J. Sonley, D.D.S.

This Committee is activated when the General Manager of O.H.I.P. has reason to question a billing submitted by a dentist.

It is again with pleasure that I report that no referrals have been made to the Committee in 1985.

The last referral to the Committee occurred in 1982. The decision made by the Committee at that time was appealed to the Health Services Appeal Board. The appeal was heard in June of this year. The Appeal Board decided that the refund to O.H.I.P. requested by the Committee was excessive and reduced the amount that was required to be refunded by the dentist.

REPORT OF THE AD HOC COMMITTEE ON DELIVERY OF DENTAL CARE TO PATIENTS IN INSTITUTIONS, PUBLIC HEALTH AND COLLECTIVE LIVING CENTRES

Chairman: G. Nikiforuk, D.D.S.

Committee Members: R.M. Beyers, D.D.S., W.J. Dunn, D.D.S., W.R. Hilliard, D.D.S., W.H. Treleaven, D.D.S., Z.M. Dossett, L.L. Mickelson

The Committee has the following objectives:

1. a) to research and collect data relating to the oral/dental needs of the geriatric population living in the above-named institutions;
b) to describe the basic minimum dental care essential for the elderly;
c) on the basis of current data, to develop a position paper that outlines the needs of the elderly and how best to meet these by:
(i) defining a workable structure that implements the basic care needs;
(ii) a liaison with the Ontario Dental Association and monitoring of the present program.
2. The Committee has reviewed the following documents and programs as they relate to the geriatric population:
a) The Riverdale Hospital Dental Service Plan by Dr. H. Mackay.
b) The Dental Health Status and Treatment Needs of Seniors in Scarborough Nursing Homes for the Aged by R.T. McIntire.
c) The Health Protection and Promotion Act 1983, Regulation 516-84 relating to school health services and programs with specific reference to preventive dentistry.
d) The Preventive Dentistry Geriatric Mandatory Program. This program defines the minimum service levels to be provided by all boards of health to seniors residing in collective living centres.
e) The results of the survey questionnaire to determine the oral health status of senior citizens residing in On-

tario as determined by the dental staff of the Health Departments of Ontario.

3. The Committee heard a presentation by Dr. John Tracey, Medical Director of Peel Manor, Member of the Provincial Board of Medical Directors for Homes for the Aged. Dr. Tracey shares the concerns of the Committee with respect to the delivery of dental care in homes for the aged and suggested that the best way to solve the "dental care problem" would be through the use of mobile clinics. Currently, the concept of mobile clinics cannot be implemented without the approval of the Minister of Health.

Previously unimaginable numbers of people are surviving into extreme old age, with overwhelming burdens of disease, social disadvantage and emotional vulnerability and poverty that such burdens create.

The demands of this group require the breaking down of many barriers: the attitudinal, financial, and the information barrier. We are slowly grasping the problem and must now respond by ensuring that the geriatric population will receive the care it needs and deserves.

REPORT OF THE AD HOC COMMITTEE ON REDISTRIBUTION

Chairman: W.J. Dunn, D.D.S.

Committee Members: R.T. Lang, D.D.S., R.M. Matsui, D.D.S., W.R. Patrick, D.D.S., J. Stefura, L.L. Mickelson

In November 1984, each local dental society was requested to assist the Redistribution Committee by reviewing resource material and then providing comments and suggestions. A very limited response necessitated a further reminder at the end of February 1985. When the Committee met in June 1985, it was able to carefully review some thirteen responses representing about 35 to 40 percent of the active local societies. The recommendations ranged from "make no change" to a relatively extensive re-organization.

One overriding issue pervaded the deliberations of the Committee. The effect of possible legislative changes impacting on the College as a consequence of the future Report of the Health Professions Legislative Review and the Ministry of Health's and the Legislature's reaction to it cannot yet be determined. Accordingly, the Committee recommended and the Council concurred that the deliberations of the Ad Hoc Committee on Redistribution be adjourned, to be reactivated by the President or Council at a time warranted by the circumstances.

Treasurer

REPORT OF THE TREASURER

Kenneth F. Pownall, D.D.S.

FINANCIAL STATEMENTS

- Appendix A — the Auditors' Report
- Appendix B — the Balance Sheet as at December 31st, 1984
- Appendix C — the Statement — General Fund
- Appendix D — the Statement — Building Fund
- Appendix E — the Statement — Professional Liability Insurance Fund
- Appendix F — the Statement — Centennial Fund
- Appendix G — the Statement — Harry R. Abbott Memorial Library Fund
- Appendix H — Notes to the Financial Statements

BALANCE SHEET

The Balance Sheet shows in a concise manner the state of our finances as of December 31st, 1984. It points out that in the General Fund there has been a large decrease in our surplus funds, indicating that our expenses have been in excess of our revenue. In the Professional Liability Fund there was a small increase in the surplus over 1983.

STATEMENTS OF REVENUE AND EXPENSES AND SURPLUS

a) The General Fund

Revenue

The annual fees for dentists and dental hygienists provides the College with its main source of revenue.

All dental hygienists applying for licensure in Ontario are required to successfully complete examinations. The examination fee is \$150.00.

Interest on investments continues to be an important source of revenue. The reduction in interest rates in 1984, coupled with decreasing surplus funds to invest, is the reason for diminishing revenue.

Property rent is the revenue obtained from a small apartment in our building that is occupied by our caretaker.

Sundry revenue is derived mainly from the sale of our list of members to dental related companies.

The small fee the College charges to go toward the expenses of the continuing education courses is listed as "Continuing Education".

Expenses

Generally speaking, the College has held the line with regard to expenses in comparison with 1983. Salary expenses reflect an increase in line with inflation as well as the extra costs needed to employ an additional dentist on a part-time basis. Telephone costs show a marked decrease because in 1983 we purchased our own in-house telephone system. Council honoraria shows a modest increase in per diems as well as an increase in the number of meetings held. Legal fees increased because of an increase in the number of dentists referred for discipline hearings and the cost of legal advice required for the legislative review procedures. The travel and accommodations of the members on Council is listed as Council and Committee. The Administrative item is for sundry items required for the general administration of the College. The need for in-

creased office accommodation became obvious in 1983 so Council decided to establish a Building Fund and in 1984 contributed \$200,000.00 towards it.

Surplus

In 1983 in the College's general account, there was an excess of expenses over revenue; again in 1984, the College had an even greater excess in expenses over revenue.

In the year 1984, we spent or allocated nearly \$600,000.00 more than we received. That is the reason for the requested increase in annual fees for 1985.

All indications lead us to believe that the costs of professional liability insurance will continue to rise. There are ever mounting obligations being placed on the College which will require additional staff and accommodation. These factors indicate that, despite the efforts of the members of Council and the staff to hold the line on expenditures, increases in the annual fee seem to be inevitable.

b) The Professional Liability Insurance Program

Details on the plan are covered in the Report of the Professional Liability Insurance Committee.

c) The Centennial Fund

This Fund was established in 1968 to commemorate the Centennial of the R.C.D.S. The original purpose of the Fund was to establish and update, from time to time, the exhibit on dentistry at the Ontario Science Centre. The Fund has not been used for several years.

d) The Harry R. Abbott Memorial Library Fund

The Will of the late Mrs. Dorinda Tully, which was probated in 1924, established a trust fund. The fund is a memorial to her brother, Dr. H.R. Abbott, who was President of the R.C.D.S. from 1903 to 1907. The terms of the Will direct that the interest from the fund be paid annually to the R.C.D.S. for the purchase of books for the R.C.D.S. Library. The R.C.D.S. Library became the Library of the Faculty of Dentistry, University of Toronto, in 1925. Since it is costly to attempt to change the wording of the Will, the money accumulating from the investments is paid to the R.C.D.S. and the College forwards the money to the Faculty of Dentistry of the University of Toronto.

RE-APPOINTMENT OF AUDITORS

The firm of Thorne Riddell continues to provide very efficient and capable auditing services as it has for many years. It was recommended that they be re-appointed as our auditors for the year 1985.

APPRECIATION

Presenting this Report provides me with the opportunity to bring to the attention of the members of the College a fact of which I believe many of you are well aware. This College is fortunate to have a staff of loyal and devoted people. I appreciate the assistance they provide in the administration of the R.C.D.S.

**THORNE
RIDDELL**

Chartered Accountants

**AUDITORS' REPORT**

To the Members of the Council of
The Royal College of Dental Surgeons of Ontario

We have examined the balance sheet of The Royal College of Dental Surgeons of Ontario as at December 31, 1984 and the statements of revenue and expenses and surplus for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the College as at December 31, 1984 and the results of its operations for the year then ended in accordance with the basis of accounting described in note 1 applied consistently with that of the preceding year.

Toronto, Canada
March 27, 1985

Thomas Riddell

Chartered Accountants

B

THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO
(Incorporated under the Health Discipline Act, Part II, of Ontario)
BALANCE SHEET AS AT DECEMBER 31, 1984

ASSETS	1984	1983	LIABILITIES	1984	1983
GENERAL FUND					
Funds held in trust (note 2)	\$ 5,237	\$ 8,122	Trust funds	\$ 5,237	\$ 8,122
Cash	1,034,903	97,355	Accounts payable	50,258	66,562
Investment in bonds and treasury bills	385,754	1,550,618	Deferred revenue, licentiate fees	1,237,490	842,010
Accounts receivable	114,477	110,322		1,292,985	916,694
Receivable from Professional Liability Insurance Fund	10,590	5,578	Surplus	257,976	855,301
	\$1,550,961	\$1,771,995		\$1,550,961	\$1,771,995

BUILDING FUND

Cash	\$ 5,137		Surplus	\$ 212,992
Investment in bonds	207,855			
	\$ 212,992			

PROFESSIONAL LIABILITY INSURANCE FUND

Cash	\$ 453,482	\$ 481,747	Deferred revenue, members' assessments	\$ 637,395	\$ 419,750
Investment in bonds and treasury bills	2,862,796	2,303,240	Provision for unsettled claims (note 4)	957,692	607,600
Accounts receivable	395,955	300,797	Payable to General Fund	10,590	5,578
	\$3,712,233	\$3,085,784	Surplus	2,106,556	2,052,856
				\$3,712,233	\$3,085,784

CENTENNIAL FUND

Cash	\$ 30,458	\$ 27,980	Surplus	\$ 30,684	\$ 28,147
Interest receivable	226	167			
	\$ 30,684	\$ 28,147			

HARRY R. ABBOTT MEMORIAL LIBRARY FUND

Cash	\$ 51	\$ 51	Surplus	\$ 1,151	\$ 2,751
Interest receivable (from estate) ..	1,100	2,700			
	\$ 1,151	\$ 2,751			

C

THE ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO
GENERAL FUND
STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1984

	1984	1983
Revenue		
Annual fee and licence fee		
Dentists	\$1,713,175	\$1,660,083
Less portion attributable to the Professional		
Liability Insurance Fund	722,960	576,380
	990,215	1,083,703
Hygienists	124,765	114,384
Examination fees (dental hygienists)	34,300	40,925
Interest	140,032	164,154
Property rent	2,100	2,300
Sundry	12,990	10,060
Continuing education	46,587	69,030
Administration charge to the Professional		
Liability Insurance Fund	33,000	30,000
	1,383,989	1,514,556
Expenses		
Salary and salary charges	556,437	504,762
Postage and courier	58,501	58,749
Printing, stationery and supplies	95,029	124,441
Telephone	17,617	33,448
Equipment – purchase, rental and maintenance	53,186	98,642
Property expenses	44,488	52,846
Staff travel	44,458	49,828
Examinations (dental hygienists)	46,337	48,571
Honoraria	296,000	260,832
Continuing education	88,683	98,793
Professional fees		
Legal	304,402	225,045
Audit	7,500	7,700
Witness and court reporter fees	16,991	4,800
Council insurance	2,263	1,495
Council and committee	103,861	100,534
Radiation safety survey		380
Grants		
Canadian Dental Association	24,735	23,815
Canadian Fund for Dental Education	1,000	1,000
University of Toronto	3,750	4,618
University of Western Ontario	3,750	2,300
Other		2,608
Administrative	12,326	16,995
Contribution to building fund	200,000	
	1,981,314	1,722,202
EXCESS OF EXPENSES OVER REVENUE	597,325	207,646
SURPLUS AT BEGINNING OF YEAR	855,301	1,062,947
SURPLUS AT END OF YEAR	\$ 257,976	\$ 855,301

D**BUILDING FUND****STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1984**

Revenue	
Contribution from General Fund	\$ 200,000
Interest	12,992
	<u>212,992</u>
Expenses	<u>Nil</u>
EXCESS OF REVENUE OVER EXPENSES,	
BEING SURPLUS AT END OF YEAR	\$ 212,992

E**PROFESSIONAL LIABILITY INSURANCE FUND****STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1984**

	1984	1983
Revenue		
Members' assessments	\$ 722,960	\$ 576,380
Interest	383,130	336,797
	<u>1,106,090</u>	<u>913,177</u>
Expenses		
Insurance premium	177,791	147,952
Broker and consultant fees	15,570	14,908
Insurance adjuster	3,013	46,757
Claims	59,283	64,701
Provisions for unsettled claims (note 4) ...	763,715	365,062
Administration charge from General Fund .	33,000	30,000
Sundry	18	(331)
	<u>1,052,390</u>	<u>669,049</u>
EXCESS OF REVENUE OVER EXPENSES	53,700	244,128
SURPLUS AT BEGINNING OF YEAR	2,052,856	1,808,728
SURPLUS AT END OF YEAR	<u>\$2,106,556</u>	<u>\$2,052,856</u>

F**CENTENNIAL FUND****STATEMENT OF REVENUE AND EXPENSES AND SURPLUS
YEAR ENDED DECEMBER 31, 1984**

	1984	1983
Revenue		
Interest	\$ 2,587	\$ 1,978
Expenses		
Professional fees	50	50
EXCESS OF REVENUE OVER EXPENSES	2,537	1,928
SURPLUS AT BEGINNING OF YEAR	28,147	26,219
SURPLUS AT END OF YEAR	<u>\$30,684</u>	<u>\$28,147</u>

G**HARRY R. ABBOTT
MEMORIAL LIBRARY FUND****STATEMENT OF REVENUE AND EXPENSES
AND SURPLUS
YEAR ENDED DECEMBER 31, 1984**

	1984	1983
Revenue		
Interest	\$1,800	\$3,051
Expenses		
Grant to University of Toronto		
Library Fund	3,400	1,687
EXCESS OF REVENUE OVER		
EXPENSES (EXPENSES OVER		
REVENUE)	(1,600)	1,364
SURPLUS AT BEGINNING		
OF YEAR	2,751	1,387
SURPLUS AT END OF YEAR	<u>\$1,151</u>	<u>\$2,751</u>

H**NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 1984****1. Accounting Policies**

The College follows generally accepted accounting principles except that the cost of furniture, equipment and leasehold improvements is included in expenses as incurred (1984, \$18,071; 1983, \$101,425).

2. Segregated Funds

At December 31, 1984 the Association maintained in trust \$5,237 (1983, \$8,122) for refund to patients following claims made against member Dentists.

3. Building Fund

In 1984 a fund was established to provide for the purchase of office facilities. An initial contribution of \$200,000 was received from the General Fund and a similar amount will be contributed by the General Fund on an annual basis.

4. Professional Liability Insurance Fund

This fund was established by the College by allocating a portion of the fees charged to Dentists on an annual basis as approved by the Board. The insurance coverage for claims has been established to cover validated claims in excess of a deductible portion on an annual basis. The College is liable for the first \$25,000 of a validated claim subject to a maximum loss limit on an annual basis of \$550,000 (1983, \$360,000). The Dentists are liable to the College for a deductible portion on each validated claim of \$500 (1983, \$500). The College is additionally liable for all insurance adjuster fees related to claims arising since January 1, 1977. Provision has been recorded in the accounts for the liability with respect to unsettled claims and the insurance adjuster fees related thereto. Final settlement of claims is subject to satisfactory resolution between the insurance company and the College.

5. Long Term Lease

In 1972 the land and building at 230 St. George Street was sold to The Ontario Dental Association for \$2. The Royal College of Dental Surgeons of Ontario has leased the land and building from The Ontario Dental Association for a period of twenty-five years expiring September 30, 1997 for \$1 plus various operating charges as specified in the lease with an option to renew for an additional twenty-five years and a right of first refusal on any offer for purchase of the property.

Statistical

DEGREE OF 'BUSYNESS' OF ONTARIO DENTISTS/ 1985

Years since Graduation	Number of DDS Responding	% of Respondents Less Busy than Would Like	% of Respondents Content with Patient Load	% of Respondents Too Busy
0-4	489	63	36	1
5-9	705	59	40	1
10-14	638	46	52	2
15-19	491	36	60	4
20-24	346	44	53	3
25-29	265	38	59	3
30-34	245	30	67	3
35-39	145	24	69	7
40-44	67	20	78	2
45-49	23	13	83	4
above 50	12	25	75	—

LICENSED DENTISTS DECEASED

Burns, R.J. (1969)	Oct. 22, 1985
Fraser, D.C. (1942)	Sept. 29, 1985
Granat, H.A. (1956)	Dec. 2, 1984
Gipters, V. (1960)	Feb. 4, 1985
Hateley, R.M. (1973)	Sept. 6, 1985
Hord, A.B. (1947)	July 1, 1985
Irish, P.J. (1952)	May 10, 1985
Kelly, L.G. (1955)	Jan. 5, 1985
Lachowicz, A.R. (1962)	Mar. 6, 1985
MacLennan, M. (1959)	Sept. 12, 1985
Rouleau, G.A. (1954)	Oct. 15, 1984
Sayers, G.E. (1945)	July 1, 1985
Small, E.J.C. (1951)	July 6, 1985

(year of graduation)

Dental Hygienists
2567

REMOVALS AND REINSTATEMENTS

Left Ontario	14
Deceased	13
Retired	50
Not Renewing	48
Removed	21
Reinstated	44

ADDITIONS TO THE REGISTER

University of Toronto	104
University of Western Ontario	50
N.D.E.B. Certificates	80
General Licence (from Education)	21
Academic Licence	2
Approved by the Registration Committee	1

LICENCES ISSUED

Dentists
5322 Members*

*(Includes 8 Life Members and 291 Out-of-Province Members)

AGE RANGE OF DENTISTS BY COUNTY

County, District, Region	Less Than 31	31-40	41-50	51-60	61-65	Over 66	Total
BRANT	1	17	13	2	0	3	36
BRUCE	2	11	2	0	2	0	17
DUFFERIN	0	7	4	1	0	1	13
ELGIN	3	11	2	5	1	1	23
ESSEX	19	65	28	23	7	5	147
FRONTENAC	8	27	14	4	7	4	64
GREY	0	9	13	5	2	2	31
HALDIMAND-NORFOLK	5	7	7	4	1	1	25
HALIBURTON	0	0	2	0	0	0	2
HALTON	31	47	46	14	9	1	148
HASTINGS	8	22	8	6	3	2	49
HURON	7	6	2	3	0	0	18
KENT	12	16	11	4	3	2	48
LAMBTON	15	28	7	7	3	3	63
LANARK	2	4	4	2	2	0	14
LEEDS, GRENVILLE	2	8	8	7	1	3	29
LENNOX ADDINGTON	0	1	3	1	0	1	6
METRO TORONTO	336	558	430	240	119	90	1773
MIDDLESEX	41	88	47	38	19	12	245
MUSKOKA	2	4	3	5	0	1	15
NIAGARA	24	69	37	34	14	9	187
NORTHUMBERLAND	3	9	8	2	1	1	24
DURHAM	24	68	29	15	6	2	144
OTTAWA CARLETON	60	136	77	62	18	17	370
OXFORD	2	12	9	5	4	1	33
PEEL	67	111	60	21	4	6	269
PERTH	2	9	8	2	3	1	25
PETERBOROUGH	5	16	19	4	4	0	48
PRESCOTT RUSSELL	2	12	2	0	1	0	17
PRINCE EDWARD	1	1	1	1	1	1	6
RENFREW	7	17	6	8	0	1	39
SIMCOE	23	45	25	10	5	4	112
STORMONT DUNDAS GLEN	4	10	9	4	0	2	29
VICTORIA	0	3	8	0	2	1	14
WATERLOO	17	67	43	19	11	6	163
WELLINGTON	11	20	22	6	5	2	66
HAMILTON-WENTWORTH	29	77	57	35	18	12	228
YORK	45	65	22	13	1	2	148
ALGOMA	9	24	16	11	6	0	66
COCHRANE	10	15	7	3	0	0	35
KENORA,	5	7	5	2	1	0	20
MANITOULIN	0	3	0	0	0	1	4
NIPISSING	4	12	8	10	4	0	38
PARRY SOUND	1	7	1	1	1	1	12
RAINY RIVER	2	2	0	3	1	0	8
SUDBURY	12	27	11	14	5	2	71
THUNDER BAY	11	33	18	9	2	1	74
TIMISKAMING	3	3	3	5	1	0	15
Totals	877	1816	1165	670	298	205	5031
Percentage of Total	17.4	36.1	23.2	13.3	5.9	4.1	100

**RATIO OF DENTISTS
TO POPULATION
IN ONTARIO**

Dec. 31, 1985

POPULATION 8,944,670

NUMBER OF DENTISTS 5031

RATIO 1:1778

Electoral District	County Region or District	Assessed Population	No. of Dentists	Dentist/ Population
No. 1	Frontenac	112,910	64	1:1764
	Lanark	48,700	14	1:3479
	Leeds, Grenville	84,110	29	1:2900
	Lennox, Addington	35,000	6	1:5833
	Prescott, Russell	56,310	17	1:3312
	Renfrew	89,400	39	1:2292
	Stormont, Dundas and Glengarry	103,890	29	1:3582
	Regional Municipality of Ottawa-Carleton	584,300	370	1:1579
	TOTALS	1,114,620	568	1:1962

Population Ratio

1985 1:1962

1984 1:1945

No. 2	Hastings	110,590	49	1:2257
	Northumberland	67,300	24	1:2804
	Peterborough	105,090	48	1:2189
	Prince Edward	22,550	6	1:3758
	Victoria	51,900	14	1:3707
	Haliburton	12,010	2	1:6005
	Regional Municipality of Durham	307,700	144	1:2137
	TOTALS	677,140	287	1:2359

Population Ratio

1985 1:2359

1984 1:2390

No. 3	Algoma	138,600	66	1:2100
	Cochrane	98,820	35	1:2823
	Kenora	60,260	20	1:3013
	Manitoulin	11,230	4	1:2807
	Nipissing	80,810	38	1:2127
	Rainy River	23,100	8	1:2888
	Sudbury	184,900	71	1:2604
	Thunder Bay	154,140	74	1:2083
	Timiskiming	41,810	15	1:2787
	TOTALS	793,670	331	1:2398

Population Ratio

1985 1:2398

1984 1:2406

No. 4	Metropolitan Toronto	2,158,200	1773	1:1217
	York Region	297,200	148	1:2008
	TOTALS	2,455,400	1921	1:1278

Population Ratio

1985 1:1278

1984 1:1305

Electoral District	County Region or District	Assessed Population	No. of Dentists	Dentist/Population
No. 5	Bruce	63,000	17	1:3706
	Dufferin	33,100	13	1:2456
	Grey	75,120	31	1:2423
	Huron	56,380	18	1:3132
	Simcoe	235,700	112	1:2104
	Districts of Muskoka	40,400	15	1:2693
	Parry Sound	34,850	12	1:2904
	TOTALS	538,550	218	1:2470

Population Ratio

1985 1:2470

1984 1:2447

No. 6	Elgin	70,320	23	1:3057
	Essex	314,000	147	1:2136
	Kent	106,820	48	1:2225
	Lambton	127,500	63	1:2024
	Middlesex	326,100	245	1:1331
	TOTALS	944,740	526	1:1796

Population Ratio

1985 1:1796

1984 1:1808

No. 7	Brant	106,010	36	1:2945
	Oxford	86,600	33	1:2624
	Perth	66,690	25	1:2668
	Wellington	135,400	66	1:2052
	Regional Municipality of Hald-Norfolk	91,190	25	1:3647
	Regional Municipality of Waterloo	319,000	163	1:1957
	TOTALS	804,890	348	1:2312

Population Ratio

1985 1:2312

1984 1:2298

No. 8	Regional Municipality of Halton	268,300	148	1:1813
	Hamilton-Wentworth	419,510	228	1:1840
	Niagara	373,010	187	1:1995
	Peel	553,100	269	1:2056
	TOTALS	1,613,920	8321	1:1940

Population Ratio

1985 1:1940

1984 1:1990

PRESIDENTS

*B.W. Day	Apr. 1868-Jun. 1870
*H.T. Wood	Jun. 1870-Jul. 1874
*C.S. Chittenden	Jul. 1874-May 1889
*H.T. Wood	May 1889-Mar. 1893
*R.J. Husband	Mar. 1893-Apr. 1899
*G.E. Hanna	Apr. 1899-Apr. 1901
*A.M. Clark	Apr. 1901-Apr. 1903
*H.R. Abbott	Apr. 1903-Apr. 1907
*R.B. Burt	Apr. 1907-Apr. 1909
*G.C. Bonnycastle	Apr. 1909-May 1911
*W.J. Bruce	May 1911-May 1913
*D. Clark	May 1913-May 1915
*W.C. Davy	May 1915-May 1917
*W.C. Trotter	May 1917-May 1918
*W.M. McGuire	May 1918-May 1921
*M.A. Morrison	May 1921-May 1923
*A.D.A. Mason	May 1923-May 1925
*E.E. Bruce	May 1925-May 1927
*R. Gordon McLean	May 1927-May 1929
*S.S. Davidson	May 1929-Jun. 1931
*S.M. Kennedy	Jun. 1931-May 1933
*H. Irvine	May 1933-May 1935
*G.H. Holmes	May 1935-May 1937
*E.C. Veitch	May 1937-May 1939
*L.D. Hogan	May 1939-May 1941
*F.A. Blatchford	May 1941-May 1943
*G.H. Campbell	May 1943-May 1945
*S.W. Bradley	May 1945-May 1947
*H.W. Reid	May 1947-May 1949
*S.J. Phillips	May 1949-May 1951
*R.O. Winn	May 1951-May 1953
*C.M. Purcell	May 1953-May 1955
*R.J. Godfrey	May 1955-May 1957
*M.C.G. Bebee	May 1957-May 1959
*M.V.J. Keenan	May 1959-May 1961
*A.H. Leckie	May 1961-Apr. 1963
W.G. Bruce	Apr. 1963-Apr. 1965
J.P. Coupland	Apr. 1965-Feb. 1967
J.D. Purves	Feb. 1967-Jan. 1969
H.M. Jolley	Jan. 1969-Jan. 1971
N.L. Diefenbacher	Jan. 1971-Jan. 1973
P.P. Zakarow	Jan. 1973-Jan. 1975
R. Paul McCutcheon	Jan. 1975-Jan. 1977
E.G. Sonley	Jan. 1977-Jan. 1979
A.J. Calzonetti	Jan. 1979-Jan. 1981
C.A. Doughty	Jan. 1981-Jan. 1983
R.L.J. Fillion	Jan. 1983-Jan. 1985
G.E. Pitkin	Jan. 1985-

SECRETARIES

*J. O'Donnell	Apr. 1868-Jul. 1870
*J.B. Willmott	Jul. 1870-Jun. 1915
*W.E. Willmott	Jul. 1915-May 1940
*Don. W. Gullett	May 1940-Jul. 1956
Wesley J. Dunn	Jul. 1956-Feb. 1965
Kenneth F. Pownall	Feb. 1965-

*Deceased

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